International Continence Society August 22-26, 1999

29th Annual Meeting

Video Demonstration Denver, Colorado USA

Ref. No. 237

## **Abstract Reproduction Form B-1**

8

Category No.

	Double Spacing	
Institution City Country	<pre>lst&amp;2nd Dept. Obstetrics and Gynecology, University of Milan*, Presidio Ospedaliero, Desio*, Ospedale Valduce*, Como, Ospedale S. Anna, Torino**, Ospedale Pieve di Coriano, Mantova**, Ospedale S. Luigi, University .of Turin**. (ITALY)</pre>	
oound y	Double Spacing	
Title (type in CAPITAL LETTERS)	TENSION-FREE-VAGINAL-TAPE (TVT) FOR THE TREATMENT OF STRESS INCONTINENCE: AN ITALIAN MULTICENTER STUDY	

Aim: The aim of the study was to evaluate the safety and efficacy of TVT (Tension-free vaginal tape for the surgical correction of stress urinary incontinence.

**Methods**: The design was a prospective open multicenter study including six Italian Hospitals. Between December 1997 and November 1998, 159 patients were enrolled in the study, a minimum of 20 patients for each partecipating center was requested [1]. Before surgery, subjects had been studied through their history, urine culture, physical examination, cotton swab test, cough provocation test and urodynamic evaluation including: uroflometry, water cystometry and urethral profilometry.

The pre-and post operative protocol as indicated above included a gynecologic examination for the assessment of pelvic floor defect, a stress test, with filled (300ml) bladder, to objectivate urinary leakages, a Q-tip test for the evaluation of bladder neck mobility, and when possible a full urodynamic investigation [2]. Incontinence inconvenience has been quantified through a 10-grade visual analogue scale (VAS). Post-operative patients were assessed after 3,6 and 12 months.

**Results:** All patients were followed for at least six months (median seven months) and most of them were operated on under local anesthesia, whilst the remaining using an epidural anesthesia. The mean age of the patients was 56 years (31-78) and 25 of them had undergone to a previous operation for the treatment of stress incontinence or genital prolapse.

Out of 159 patients 148 (93%) were cured, which means that they did not leak urine postoperatively, either objectively or subjectively. There were few intra and postoperative complications. Thus we had 12 bladder perforations and in 2 subjects a Retzius hemorrhage.

A bladder catheter was inserted after the operation only in 64 women for a minimum of twelve hours.

The evaluation with the analogue symptoms scale showed a significant decrease of the discomfort referred by the patients.

<u>Conclusions</u>: From the present results it seems justified to conclude, according to other experience, that TVT can be considered a safe and effective procedure for the surgical treatment of stress incontinence [3]. A longer follow-up is needed to verify the long-lasting effectiveness of this technique and if it can be considered, in the future, the first choice tratment for urinary stress incontinence.

Category No.	Video	Ref. N 🔶 e 2)
	Demonstration	237

## **Abstract Reproduction Form B-2**

Author(s):

M. Meschia, A. Bonaguidi, U. Gattei, F. Bernasconi, F.

**References**:1.Ulmsten U., Falconer C., Johnson P., et al. A Multicenter study of Tension Free Vaginal Tape (TVT) for surgical treatment of stress urinary incontinence. Int.Urogynecol.J.1998;9:210-13

2.Petros P., Ulmsten U. An Integral Theory of female urinary incontinence.

Experimental and clinical considerations. Acta Obstet Gynecol Scand 1990;69 (suppl 153) 3.Ulmsten U., Henriksson L., Johnson P., et al. An ambulatory surgical procedure under local aneshesia for tretment of female urinary incontinence - Int Urologynecol J 1996; 7:81-86.