

Category No.	
	12

--

Ref. No.	
	272

### Abstract Reproduction Form B-1

Author(s):	J. Bidmead, K. Anders L. Cardozo, V. Khullar, A Hextall
	Double Spacing
Institution City Country	Department of Urogynaecology, Kings College Hospital, London UK.
	Double Spacing
Title (type in CAPITAL LETTERS)	THE EFFECT OF PERIURETHRAL INJECTION AS "SALVAGE SURGERY" FOR INTRACTABLE STRESS INCONTINENCE.

**AIMS OF STUDY**

The aims of the study were to investigate the effect on quality of life of periurethral injection as "salvage" surgery for stress incontinence in a group of women unfit or unsuitable for conventional bladder neck surgery.

Objective and standardised subjective outcome methods were utilised to assess the impact of urinary symptoms on women's quality of life.

**METHODS**

The study involved group of thirty one women mean age was 63 years (range 57 to 80 years). They had undergone a mean of 2.1 (range 1-4) previous incontinence operations and due to surgical scarring, previous radiotherapy or for medical reasons were judged unsuitable for alternative surgical procedures. These are summarised in table 1.

**TABLE 1**

Previous Incontinence Operations	Number
One	3
Two	12
Three	4
Four	2
Radical surgery and Radiotherapy	5
Infirm Elderly	5

Prior to surgery women were assessed using subtracted cystometry, 18(58%) were judged to have severe GSI and the remaining 13(42%) moderate GSI. Two women had detrusor instability controlled on anticholinergic medication.

Women were assessed prior to surgery using a standardised ICS one hour pad test and completed a validated disease specific quality of life (QoL) questionnaire.

Paraurethral injection, using GAX collagen or Macroplastique was performed under general or local anaesthesia.

Six months following surgery women were again assessed using an ICS one hour pad test and completed the QoL Questionnaire.

The results of the pad tests and changes in QoL scores were then analysed using SPSS for windows V.8. Wilcoxon paired sample tests were used to determine significance.

## Abstract Reproduction Form B-2

J. Bidmead, K. Anders L. Cardozo, V. Khullar, A Hextall.

Author(s):

### RESULTS

Pre-operative pad tests results showed significant urine loss while post-operative tests showed a reduced but still significant loss as shown in table 2.

**Table 2**

Pad Test Loss (g)	Median (g)	25 <sup>th</sup> - 75 <sup>th</sup> Centiles (g)
Pre-operative	42	11 - 75
Post-operative	1.1	0.2 - 6

However analysis of pre and post operative QoL scores showed sustained and significant improvement in the majority of QoL domains as summarized in table 3.

**Table 3**

Quality of life Domain	Pre-operative scores mean (SD)	Post-operative scores (SD)	Significance
General Health Perception	37.9 (20)	37 (27)	0.593
Incontinence Impact	80 (26)	46 (29)	<b>0.001</b>
Role limitation	54 (33)	23 (26)	<b>0.025</b>
Physical limitation	63 (35)	33 (34)	<b>0.008</b>
Social limitation	45 (37)	18 (28)	<b>0.031</b>
Personal relationships	18 (29)	44 (45)	0.102
Emotions	57 (32)	33 (28)	<b>0.005</b>
Sleep / Energy	47 (19)	35 (20)	0.040
Symptom Severity Scores	70 (22)	47 (33)	<b>0.015</b>

### Conclusions

This study was undertaken in a group of women where conventional surgical procedures would have been difficult or impossible. Objective measurements show what might be regarded as sub-optimal results. The use of a disease specific QoL tool however, demonstrates a significant improvement in symptoms, demonstrating that periurethral injection can provide an improvement in quality of life in a group of women where tradition techniques are not an option.

Conventionally surgical success or failure is described in terms of subjective and objective measures. This study also demonstrates that the use of a standardised disease specific QoL tool may provide a more accurate reflection of the effect of surgery on symptoms. This is particularly important in women for whom symptomatic improvement rather than absolute cure is the aim.