## **International Continence Society**

August 22-26, 1999

29th Annual Meeting

Denver, Colorado USA

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

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Institution City Country	1Hôpital Jean Rostand, Ivry-sur-Seine, FRANCE, 2Southwestern Medical School, Dallas, USA
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itie (type in APITAL ETTERS)	ANALYSIS OF THE EFFECT OF A VAGINAL PACK ON MICTURITION IN WOMEN WITH LARGE CYSTOCELE (GRADE IV)

Aims of study: To assess the effect on the urethral mechanics and on the detrusor efficiency of a vaginal pack for women with large cystoceles.

Methods: Twenty one women with cystocele grade IV (mean age: 72.7 years, range:64-84 years) underwent 2 pressure-flow studies during the same urodynamic session: first with vaginal pack, second after removal of the pack. Only 14 patients succeedeed in doing 2 uninterrupted flows with a voided volume . 100 mL. Modelized analysis[1] of the flow curves allowed first to estimate an obstruction coefficient of the urethra (g) and second to calculate a characteristic parameter of the detrusor efficiency (F40). The g value is 1 for a normal subject, < 1 for a constrictive obstruction and > 1 for a gaping urethra.

Results: a) The calculated curve of the efficient vesical pressure is very close to the recorded curve of the detrusor pressure. b) In 10 patients (71.4%) the vaginal pack reduced significantly (p < .0001) the constrictive effect of the cystocele (g with pack = 1.89 ±0.30 g without pack) but did not reach a normal urethral level. In 4 patients (28.6%) the vaginal pack had no effect (g with pack = 1.01 ± 0.10 g without pack).

We did not found any correlation between the effect of the pack and the age of the patient or the shape of the curves of flow and vesical pressure. c) In a striking contrast with the usual effect of surgery for correction of incontinence the pack did not reduce the detrusor efficiency.

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

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Conclusion: This study clearly indicates 2 separate trends for the ratio of g (urethral constrictive effect) values, with or without vaginal pack to reduce the cystocele. This mathematical modeling of pressure-flow curves enhances the findings of urodynamic testing by providing unique information on the preoperative condition of patients with large cystoceles.

[1] Ann Réadap Méd Phys, 1992, 35 1-10; Prog Urol April 1999.