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Author(s):	M Shahbandi, P Ayvazian, RD Blute Jr
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Institution City Country	University of Massachusetts Medical Center Worcester, Massachusetts USA
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Title (type in CAPITAL LETTERS)	THE ANTERIOR VAGINAL WALL SLING URETHROPEXY AND ITS ROLE IN STRESS URINARY INCONTINENCE

Aims of Study: We assessed the results of anterior vaginal wall sling urethropexy for treatment of patients suffering from stress incontinence.

Methods: Thirty-four unselected patients, ages 37-81 years, suffering from stress incontinence were included in this study. The procedure entailed securing a 4cm x 2cm segment of anterior vaginal wall fascia as a sling, de-epithelializing the segment, and placement of two vesica bone anchors. Then, using vesica needles, a urethropexy was performed between the anchors and the anterior vaginal wall segment. The sutures were then tied down using a vesica suture spacer to secure the suture without overtieing.

Results: All patients were discharged on the day of operation with indwelling catheters. Catheters were removed on post-op day 4. Patients returned to normal activity within 7 days. At a mean follow-up of 15 months, the cure rates for preoperative symptoms were, as follows: frequency 98%, nocturia 97%, urge incontinence 89%, stress incontinence 90%. No significant complications such as infection, urinary retention, delayed bleeding, or suture erosion occurred in these patients.

Conclusions: Anterior vaginal wall sling urethropexy is an effective, minimally invasive technique incorporating native tissue as a sling for treatment of stress incontinence.