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### Abstract Reproduction Form B-1

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Title (type in CAPITAL LETTERS)	PERIURETHRAL INJECTION OF MACROPLASTIQUE® FOR FEMALE GENUINE STRESS INCONTINENCE – A REVIEW OF RESULTS AFTER A MINIMUM 18 MONTH FOLLOW UP

**Aims of Study:** Endoscopic peri-urethral injection of bulking agent is a treatment option for some women with genuine stress incontinence (GSI) .To date, reports of the use of silicone microimplants (Macroplastique® Uroplasty Ltd.) are few in number and, in some cases , only comprise short-term follow-up. The cost of injectable material itself is a major component of the overall cost of the procedure. Also, the amount of Macroplastique® used per patient varies and it is not known whether this variation is related to the long-term outcome of the procedure. If patients who require greater volumes of bulking agent tend to have a poorer long-term outcomes, then it could be argued such individuals should be managed methods other than injection of bulking agents.

**Methods:** Over a 4 year period, 1993-1997, 38 female patients (mean age 52, range 35-79) with documented stress incontinence on routine cystometry, underwent periurethral injection of Macroplastique®. No patient had undergone previous surgical treatment of GSI. Injection was under general anaesthetic via cystoscopic control into the 3,6,9 and 12 o'clock positions 1cm distal to the bladder neck. All procedures were performed by a single surgeon. The amount of Macroplastique® injected for each case was determined as that needed to produce adequate apposition of the urethral walls determined visually by the surgeon.

**Results:** All but 4 patients were treated as daycases. There were no major complications. The results at a minimum 18 month follow-up (mean 31.5 months, range 18-67) showed 32% of patients to be completely dry, 46% significantly improved ( to a state where the patient felt they did not require any further intervention) and 22% to be only slightly improved or not improved at all. Three-quarters of patients required more than one syringe of Macroplastique® to obtain adequate apposition of the urethral walls. The amount of material injected was not related to the outcome at a minimum follow-up of 18 months.

**Conclusion:** Overall, 78% of patients were cured or significantly improved following peri-urethral injection of Macroplastique®. There was no obvious link between the volume of material injected and the eventual outcome of the procedure at 18 months minimum follow-up. Three-quarters of patients required more than a single syringe of Macroplastique® (2.5cc – price £355.00 each).