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Title (type in CAPITAL LETTERS): **THE USE OF PROPHYLACTIC STAMEY BLADDER NECK SUSPENSION TO PREVENT POSTOPERATIVE STRESS URINARY INCONTINENCE IN CLINICALLY-CONTINENT WOMEN UNDERGOING GENITOURINARY PROLAPSE REPAIR**

Aims of Study: To evaluate the efficacy of Stamey bladder neck suspension in preventing postoperative stress urinary incontinence in *clinically- continent* women undergoing surgery for genitourinary prolapse.

Methods: Thirty clinically-continent women with grade-3 genitourinary prolapse were found to have a positive stress test with repositioning of the prolapse. They all had significant urethrovesical junction hypermobility. In addition to the genitourinary prolapse repair, these patients underwent a prophylactic Stamey procedure to prevent the possible development of postoperative stress urinary incontinence.

Results: The mean duration of follow-up was 8 ± 4.5 months (range, 3-19 months). Seven (23.30%) patients developed subjective and objective (proven by urodynamic evaluation) postoperative stress urinary incontinence. Eleven (36.7%) other patients developed objective postoperative stress incontinence, but without subjective complaints of stress incontinence. Postoperative complications were uncommon and minor. **Conclusions:** Continent patients with a positive stress test, demonstrated on repositioning of the prolapse during preoperative urodynamic evaluation, are considered to be at high risk for developing postoperative stress urinary incontinence. In these patients, an additional, effective anti-incontinence procedure should be considered during surgical correction of the genitourinary prolapse. The Stamey procedure seems to offer an acceptable and safe solution to this problem, although longer follow-up is needed.

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