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MINIMAL DOSING COLLAGEN INJECTIONS IN SCHEDULED STEPS TO IMPROVE INCONTINENCE CURE RATE

Aims of Study: In 1995 we published our results about collagen injections as minimally invasive management of type III stress urinary incontinence. Then we enlarged our indications, according to the effective preliminary results, also to type I and post radical prostatectomy incontinence. At present we report the evolution of our experience regarding the procedure of *minimal dose injections in scheduled steps*.

Methods : Years long of the experience can't be spent without remarks and suggestions in therapeutic strategies. Today we dissuade from a unique implant with large quantity of collagen and are in favour of repeated injections in scheduled steps with minimal dose: 5 ml injected transurethrally in positions 5 and 7 every 2 months for three times. The first builds, the second consolidates and the third settles continence with the most lasting effectiveness: 24 patients (18 women and 6 men) average age 60, underwent the treatment and were checked at twelve months follow-up.

Results : effectiveness was complete in 16 women and 5 men, improvement was reported in the other patients. All they repeated, for comparison, the diagnostic assessment: RX graphics, laboratory echographic and urodynamic.

Conclusions . we suggest to implant collagen in small quantity for more injections scheduled in some months. more effective and lasting results are expected from this procedure due to the poorest reabsorption owing to local growing fibrosis allowing a stable addition of collagen, reaching in this way, gradually but properly, his working function.