

Author(s)	, Seung Ok Yang
Institution, city, country: Choum Am Dong Cju K	
Title (type in CAPITAL LETTERS, leave one blank line before the text):	
Comparison of Anterior Vaginal wall Sling, Vaginal Wall Sling and Pubovaginal Fascial Sling in Management of Genuine Stress Urinary Incontinence	
<p>Purpose: Pubovaginal sling using a strip of rectus fascia to compress the urethra has been the best known treatment for the stress urinary incontinence. Recently, sling procedure utilizing the vaginal wall and have come forth and the procedure appeared to be performed easily more than the pubovaginal sling and the mild stress urinary incontinence with cystocele have a good outcome by anterior vaginal wall sling operation (four corner operation). The aim of this study was to compare the safety and efficacy of the pubovaginal versus the anterior vaginal wall slings versus vaginal wall slings in treating women with genuine stress incontinence.</p>	
<p>Material and Method. We retrospectively compared 27 women treated with pubovaginal slings (group I) for genuine stress urinary incontinence to 22 women treated with anterior vaginal wall slings (group II), to 26 women treated with anterior vaginal wall slings (group III). Parameters of evaluation included the postoperative presence or urge incontinence, operation time, complications, duration of suprapubic catheterization, hospital stay and satisfaction score</p>	
<p>Results: Baseline clinical and urodynamic data were comparable for both groups. With a mean follow-up of 32 months (range 19-41) for group I, 24 were cured and 2 were improved. In group II, with a mean follow-up of 21 months (range 5-30), 12 were cured and 8 were improved. In group III, with a mean follow-up of 23 months (range 7-27), 12 were cured and 12 were improved. Postoperative de novo urge incontinence was present in 4 patients in group I, in 2 patients in group II and in 1 patient in group III. Postoperative bending pain was present in 3 patients in group I, in 3 patients in group II and in 2 patients in group III. Group I (88%), group II (83%) and group III (85%) were either very satisfied or somewhat satisfied with their surgical outcome. The operative time, hospital stays and catheterization of group II and III were significantly lower than those of group I ($p < 0.05$).</p>	
<p>Conclusion. We concluded that three techniques are equally effective in treating women with stress incontinence. However, the use of anterior vaginal wall slings and vaginal wall slings resulted in significantly shorter operative time and hospital stay compared with pubovaginal slings. But more long term follow-up recommend for surgical outcome.</p>	