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Title: THE PROTECTIVE EFFECT OF SUBURETHRAL SLINGS ON POSTOPERATIVE

CYSTOCELE RECURRENCE FOLLOWING RECONSTRUCTIVE PELVIC SURGERY

Aims of Study:

To evaluate the independent effect of suburethral sling placement on the risk of cystocele recurrence following pelvic reconstructive surgery.

Methods:

148 women with cystoceles to or beyond the hymenal ring underwent pelvic reconstructive surgery, with or without incontinence procedures, and were evaluated at 12 and 52-weeks postoperatively with a standardized pelvic examination. Rates of recurrent prolapse, at all sites, were statistically compared between subjects with and without suburethral slings. A multiple regression analysis was used to determine the independent effect of sling placement on the risk of recurrent cystoceles.

Results:

Suburethral sling placement was associated with a 54.8% reduction in the mean rate of postoperative cystocele recurrence (p=0.004). This protective effect was observed as early as 12 weeks, and remained significant at 1-year follow up (42 vs. 19%). A markedly reduced risk of cystocele recurrence was observed when sling patients were compared to all other subjects, to those who underwent other incontinence operations, and even to those who had undergone prolapse repair with no incontinence procedure. The protective effect of slings remained highly significant (O.R. 0.29, p=0.0003) even after controlling for potentially confounding variables, including previous and concomitant reconstructive surgical procedures, in a multiple logistic regression model.

Conclusions:

Suburethral sling procedures appear to significantly reduce the risk of cystocele recurrence following pelvic reconstructive surgery, in contrast to the effect of retropubic urethropexy and needle suspensions. These findings should be considered when planning the surgical treatment of stress incontinence accompanying advanced pelvic organ prolapse.