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# GYNECARE TVT TENSION-FREE SUPPORT FOR TREATMENT OF SUI: A RETROSPECTIVE CHART REVIEW USING ELECTRONIC DATA CAPTURE

## Aim of Study

To investigate the success rate of Gynecare TVT for the treatment of stress urinary incontinence (SUI) among women with routine 1 year post-operative follow-up information.

#### **Methods**

This was a retrospective chart review including women with: 1) pubovaginal sling using Gynecare TVT between October 1998 and August 2000, 2) positive cough stress test or diagnosis of SUI determined by urodynamics, 3) routine 1 year post-operative follow-up (± 2 mos), and 4) no history of pelvic radiation treatment. Four centers reviewed inpatient and outpatient medical records (pre-operative, operative, post-operative records) on all patients having the Gynecare TVT procedure to determine patient eligibility according to the criteria above. Each center entered electronic case records into a common database via an internet browser. Cure/Improvement rate was based upon medical record documentation of patient self-assessment of post-op SUI symptoms. Data collection continues; this report represents results of information entered to date.

## **Results**

Records for 285 women met the eligibility criteria. The patient disposition was: 129(45%) SUI alone, 109(38%) Mixed incontinence, 44(15%) ISD, 66(23%) previous anti-incontinence surgery, 101(35%) concomitant surgery. The average age at surgery was 56 years ( $\pm$ 13) and the duration of incontinence before surgery was 6 years ( $\pm$ 5). At 4-6 weeks post-op, 269 (94%) women reported cure or improvement in SUI symptoms [244(85%) cure; 25(9%) improved]. Similarly, at 1 year post-op, 259 (91%) women reported cure or improvement [243 (85%) cure; 16(6%) improved]. Cure/Improvement rates for patient subgroups at 1 year post-op were: 96% SUI; 92% Mixed; 89% ISD patients; 89% previous anti-incontinence surgery; 96% concomitant surgery. Complication rates were 23(8%) UTI ( $\leq$  6 wks); 18(6%) retention > 2 wks; 7(3%) mesh exposure; 12(4%) voiding dysfunction; 6 (2%) bladder perforation; 1(0.3%) hematoma

#### **Conclusion**

This chart review is a real-life representation of patients undergoing the Gynecare TVT procedure, including women with previous and/or concomitant surgery as well as conditions not limited to pure SUI. Gynecare TVT Tension-Free support is an effective treatment for SUI and for patients with varied profiles. The results of this investigation are consistent with other prospective studies reported in the literature.