

PRO-ACT FOR TREATMENT OF POSTPROSTATECTOMY-INCONTINENCE - EXPERIENCE AFTER TWO YEARS

Aims of Study

Effort incontinence after radical prostatectomy occurs in 5 to 20% of cases. Treatment options were mainly implantation of a hydraulic sphincter or the use of bulky agents. We present an entirely new therapeutic approach.

The Pro ACT Sphincter (Adjustable Continence therapy) developed by Uromedica was introduced in 1999. The Pro-ACT-System involves two balloons that are implanted periurethrally through a perineal approach. The balloon volume can easily be adjusted any time after implantation via a conduit and a port, which is implanted subcutaneously into the scrotum in a minimal invasive procedure.

We report on long-term continence and patient satisfaction in men treated for urinary incontinence after prostatectomy with the implantation of this device.

Methods

The implant and medical records of 20 consecutive patients who had the pro act device implanted for urinary incontinence after prostatectomy from September 1999 to January 2002 were collected. The results of cystometry, Valsalva leak point pressure measurement, were reviewed, and a quality of life questionnaire (Elli Lilly 1996) was evaluated. These analyses were performed by one impartial reviewer. In the years 2000 and 2001 34 patients underwent Pro-ACT-implantation (av. age 70,5). 29 Pts. are available for follow up of 3-25 month (av. 7,9 months). Primary operations were rRPE 18x, pRPE 8x, LSK-RPE 1 x, TUR/P 2x. 12 patients had received bulky agents and 5 patients underwent bladder neck incision prior to Pro-ACT-implantation.

Results

After 2-9 adjustments (av. 3,52) 15 patients were dry, 7 improved, 7 not improved. The number of pads decreased from av. 5,9 to av. 2,7. Valsalva-leak-point pressures increased from av. 25,25 to av. 55,0 cmH₂O. Complications were: intraoperative bladder perforations 3 times, postoperative ruptures of the balloon 6 times. The quality of life score obtained from the questionnaire increased from av. 53 (range 23-89) to av. 83 (range 36-106) after 6 months. Results after one year were even better compared to the results after 6 months.

Conclusions

Pro-ACT is very well accepted by patients, failures show within the first 3 month, results improve over time. In conclusion, Pro-ACT implantation offers men suffering from urinary incontinence after prostatectomy a very reasonable chance for obtaining long-term relief from this complication, less elaborate than the implantation of a hydraulic system and in our hands far more effective than bulking agents. We are happy having this new method available for our patients.