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THE OUTCOME OF THE TVT PROCEDURE:- A ONE YEAR FOLLOW UP

Aims of Study:

To investigate the outcome of the TVT procedure

Methods:

61 women were included. 51 women with genuine stress incontinence and 10 women with mixed incontinence. Of the 51 women with stress incontinence 9 were older than 70 years.

The women were assessed preoperatively and one year after surgery. The assessment consisted of symptoms, gynecological examination, urine stix, micturition diary, 24 hour pad test, cough stress test and urodynamics. As some patients were reluctant to repeat the pad test, when they were cured, data are given as subjective cure rate. In eight patients an operation for cysto- or rectocele was performed at the same time.

Results

In the group consisting of 42 women with stress incontinence aged 70 or less, 35 patients (83%) were cured, 5 (12%) were considerably improved, one (2%) was slightly improved and one (2%) was not improved. In the group over 70 years with stress incontinence 5 out of 9 (55%) were cured, 3 (33%) were considerably improved and 1 (11%) was slightly improved. In women with mixed incontinence 5 out of 10 (50%) were cured, 4 (40%) were considerable improved and 1 (10%) was not improved. In patients who performed the final pad test, there was a good agreement between the patients subjective assessment and the pad test.

Neither bladder perforations nor bleeding above 200 ml occurred. Two patients had urinary retention after the operation and the sling was loosened. One patient developed "de novo" detrusor instability and was treated with Detrusitol. Two patients experienced a slight pain in the abdominal incisions the first months. No patients experienced "de novo" dyspareunia. Of the eight patients who had a TVT combined with a cysto- or rectocele operation, 2 patients had detrusor instability before the operation and none had detrusor instability one year after the operation. The median hospital stay was one day (range 1-4 days)

Conclusions

The TVT procedure has a high cure rate in women aged 70 or less with genuine stress incontinence. The cure rate is poorer in women with genuine stress incontinence aged more than 70. This cure rate is comparable to the cure rate in women with mixed incontinence. The TVT-procedure has few complications and is well tolerated. The TVT procedure can be performed together with an operation for cysto- or rectocele. The median hospital stay is one day.