

PERIURETHRAL INJECTABLES IN THE TREATMENT OF MALE IATROGENIC URINARY INCONTINENCE

Aims of Study

To evaluate the results of minimally invasive intraurethral injection to restore continence in male iatrogenic urinary incontinence comparing two series of patients treated with two different substances.

Methods

From 1995 to 2003 25 pts underwent periurethral injections with two different injectables (Collagen and Macroplastique) to treat iatrogenic urinary incontinence. From 1995 to 1997 17 sections of collagen injection were performed in 11 patients and from 2000 to 2003 twentyone sections of Macroplastique injections were performed in 14 pts with a mean age of 63 years (range 49-77). In the collagen group 5 pts received 2 injections, two pts 3 injections, while in the macroplastique group 7 pts underwent 2 injections. All pts were affected by stress urinary incontinence due to prostatic surgery, most of them after retropubic radical prostatectomy. Evaluation at 1, 3 and 12 months consisted of clinical evaluation, ICS pad test and voiding diary. We consider improvement a reduction in leakage per day and reduction at pad test and indentified two group 50% and 90% improvement.

Results

In the first experience with collagen at a mean follow up of 7 months 3/11 pts had 90% improvement and in 5/11 had 50% improvement. In the Macroplastique group at a mean follow up of 19 months we observed a 50% improvement in 2/14 pts and a 90% improvement in 7/14 pts.

	Number patients	Number of injection	Mean Follow up	90% improvement	50% improvement
Collagen	11	17	7 m	3/11 (27%)	5/11 (45%)
Macroplastique	14	21	19 m	7/14 (50%)	2/14 (14%)

Injectables are the first step in the surgical treatment of iatrogenic urinary incontinence, considering the low invasivity but also the low success rate. In fact despite 90% improvement patients are not fully dry and have to wear pads, but on the other hand most of them are satisfied to reduce their leakage and number of pads per day.

Usually more than one injection is needed to obtain a good result and it doesn't preclude more invasive surgical treatment as artificial sphincter.

Conclusion

We believe that intraurethral injections still have a place in the treatment of male urinary incontinence and Macroplastique seems to be more effective than collagen at longer follow up.