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ADJUSTABLE CONTINENCE THERAPY (PROACT), A NEW THERAPY OF THE MALE STRESS URINARY INCONTINENCE: 1 YEAR FOLLOW UP.

Hypothesis / aims of study

The incidence of the male stress urinary incontinence (SUI) status prostate surgery is reported in 2-40%. The only surgical therapy that showed good efficacy is the artificial urinary sphincter (AUS). However this procedure is associated to an high rate of reoperation. The aim of this study was to assess the results at 1 year of follow up of a new mininvasive surgical technique called Pro ACT (adjustable continence therapy).

Study design, materials and methods

The Pro ACT is a new antiincontinence device. A balloon, a port and a tube of connection are the components of the Pro ACT. It is percutaneously implanted and is postoperatively adjustable. From September 2000 to February 2004 19 males underwent to the procedure. The mean age was 64 years (range 29-83). The sui was due in 16 cases to radical retropubic prostatectomy, in one case to TURP, in one case to prostatectomy for benign prostatic hypertrophy and one case to congenital incontinence associated with epispadya. The urodynamic exam revealed sui due to intrinsic sphinteric deficiency for all the patient. The efficacy has been assessed by average number of pads used a day and overall impression on the result of the surgery.

Results

15 patients had a follow up longer than 4 months and a mean follow up of 13 months. 9 patients (60%) were dry or improved, 6 patients (40%) were unimproved. The average number of adjustaments after the surgery was 1.6. The average number of pads used was decreased from 5.11 to 2.19. Complications included migration of both the balloons in the bladder in one patient, in this case both the device have been quickly removed in local anesthesia. In three patient the adjustments are still on going. 5 over 6 patient who were unimproved had a total incontinence.

Interpretation of results

The ProACT is a new surgical therapy for the male sui. 60% of the patients were dry or improved at 1 year follow up. The device is well accepted from the patients because it doesn't require any manual skill as the aus does. The rate of perioperative complications is low, and all the complications are easily managed because of the possibility to remove the Pro ACTs deflating the balloons.

Concluding message

The Pro ACT is a new, minimally invasive surgical therapy for male stress urinary incontinence. This technique is easy, quick and associated with a low rate of complications and a satisfactory rate of success.