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THE EFFECT OF URGENCY ON THE QUALITY OF LIFE AFTER TVT (TENSION FREE VAGINAL TAPE) PROCEDURE IN STRESS URINARY INCONTINENCE PATIENTS

Hypothesis / aims of study

The aim of this study is to determine the relationship between urgency and the change in quality of life after TVT (Tension free vaginal tape) procedure.

Study design, materials and methods

Total 93 stress urinary incontinence patients who had no detrusor overactivity on urodynamic study were selected. Average age was 46.3 years old and pre-operative average Qmax was 27.9±7.5 ml/sec with small amount of PVR (below 50ml). With the presence of urgency, we divided them into two groups, one was urgency group (36 patients who had any grade of urgency symptom) and the other was non-urgency group (57 patients). To evaluate the quality of life, they were checked voiding diary, I-QoL and uroflowmetry with PVR (post-voiding residual urine) before TVT procedure and post-operative 1st month. We compared I-QoL and the voiding parameters between each group using Mann-Whitney test.

Results

There was no significant difference of pre-operative voiding parameters and I-QoL between each group. Also we could not find any statistical difference in the change of Qmax and I-QoL after TVT procedure between each group.

	Pre-operation		Post-operation	
	Qmax(ml/sec)	I-QoL score	Qmax(ml/sec)	I-QoL score
Urgency group(n=36)	28.1±8.42	63.5	18.7±6.29	95.5
Non-urgency group(n=50)	27.7±6.94	60.6	18.6±6.02	94.4
Significance	P=0.953	P=0,912	P=0.924	P=0.815

Interpretation of results

This result shows that the presence of urgency may not be a factor to affect quality of life or patient's satisfaction after TVT procedure in the SUI patients.

Concluding message

In the SUI patients who have urgency, it is certain that doctors prefer medical treatment than surgical procedure. However our study reports the quality of life and the success rate of TVT is not affected by the presence of urgency in SUI patients who had no detrusor overactivity. So we suggest that TVT procedure is safe and effective method to treat stress urinary incontinence patients who have urgency without detrusor overactivity.