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MAGNETIC RESONANCE IMAGING OF THE PELVIS BEFORE AND AFTER TENSION FREE TAPE IN THE OBTURATOR POSITION AND TENSION FREE TAPE ALONE

Hypothesis / aims of study

We both prospectively and retrospectively imaged women who had either Tension Free tape (TVT) in the standard position or Tension Free Tape in the obturator position (TVT-OB) to determine the exact position of the taped postoperatively. Additionally we wanted to correlate the position the tape in the pelvis. We did this in order to explain the improved voiding seen in patients who had TVT-OB.

Study design, materials and methods

Eight women undergoing TVT-OB were imaged both preoperatively and six weeks postoperatively. Women wonderment history taper of its postoperatively. All in which her downfall images were done using ultrafast magnetic resonance imaging protocol.

Results

The results indicate that attention free tape in the outfit a position privacy's TNT surgical approach is both safe and in its position the pelvis is below the end of the crash. Additionally its position is confirmed the abdomen to refer. And finally we were able to document the V-shaped position the pelvis rather than a U-shaped position seen in TVT.

Interpretation of results

The superior position of the tape in the pelvis is the reason that women who undergo TVT-OB have improved voiding characteristics. Additionally there is a decrease in this incidence of De Novo detrusor instability and because of its position below the endopelvic fascia the incidence of intra-abdominal viscera damage and perforation is greatly minimized.

Concluding message

TVT-OB is a superior anatomic technique in the correction of stress urinary incontinence. The suburethral hammock created at the mid urethral position creates a doorstop type of effect and prevents urinary tract obstruction and development of De Novo detrusor instability. This MRI study documents the superior anatomic position.