

## OUTCOMES WITH BONE ANCHORED MALE BULBOURETHRAL SLING

### Hypothesis / aims of study

We report our experience with the male urethral sling (MUS) using the Male Urogenital Distress Inventory (MUDI) and Male Urinary Symptom Impact Questionnaire (MUSIQ) pre and post operatively.

### Study design, materials and methods

From October 2002 until present, 30 consecutive patients have undergone a male bulbourethral bone anchoring sling (InVance™). Preoperative information included: history and physical exam, pad history, multi-channel video urodynamics, cystourethroscopy (when indicated), as well as a completed MUDI and MUSIQ. Postoperatively patients were evaluated clinically and have completed a MUDI and MUSIQ every 6 months for 2 years. IRB approval was obtained.

### Results

Currently average follow-up since sling placement is 18.9 months. Average age at surgery was 66.7 years with a median of 4 years of incontinence pre male sling. Thirty percent of the patients had radiation therapy and 16.7% had a bladder neck contracture. The median abdominal leak point pressure was 78. In addition median preoperative pad use was 3 pads per day (range 1–12). The severity of incontinence was 25.8% mild (0-2 pads per day), 29.0% moderate (3-5 pads per day), and 45.2.7% severe (>5 pads per day). Overall pad use declined postoperatively to a median of 1 pad per day with a median severity of mild. The preoperative MUDI and MUSIQ median scores were 63 and 29.5, respectively. Preoperatively patients who had radiation therapy scored more poorly on their MUDI ( $p=0.006$ ) and MUSIQ ( $p=0.0038$ ) compared to patients without radiation treatment. Eighteen patients completed questionnaires. Additionally, 3 patients have had a removal of the sling secondary to infection and 1 patient is too ill to complete the study. Seventy-four percent of patients are dry or using  $\leq 1$  pad per day. Thirty percent of patients never use pads. The MUDI and MUSIQ total score declined postoperatively to 46.2 ( $p=0.0003$ ) and 11.9 ( $p=0.006$ ), respectively. The stress incontinence section of the MUDI declined from 21.4 to 13.1 ( $p=0.002$ ). Preoperative age did not significantly influence the MUDI or MUSIQ scores. The satisfaction rate with the male sling was 82%.

### Interpretation of results

The clinical outcomes of the MUS correlated with a significant decrease in the MUDI and MUSIQ scores.

### Concluding message

The MUDI and MUSIQ are useful tools to monitor the outcome in male incontinence.