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TVT-OBTURATOR: PRELIMINARY RESULTS OF THE FIRST 140 OPERATIONS WITH A NOVEL PROCEDURE FOR THE TREATMENT OF FEMALE URINARY STRESS INCONTINENCE

Hypothesis / aims of study

To evaluate the first 140 TVT-Obturator⁽¹⁾ patients' series preliminary data regarding the urinary incontinence cure rat, intra and postoperative complications rat and surgeon's learning curve

Study design, materials and methods

A total of 140 patients with urodynamically proven USI had the TVT-Obturator operations. The patients were followed up for 6 to 14 months for subjective and objective cure as well as for treatment complications.

Results

The TVT-Obturator procedure dose not require bladder catheterization neither intra-operative diagnostic cystoscopy. Operative complications, such as bleeding or visceral injury, were not recorded. Two patients were diagnosed with postoperative voiding difficulties: one had complete outlet obstruction and was treated successfully by tape tension loosening at theatre on the postoperative day wile the second was partial obstruction and responded well to self catheterization for two weeks. No infective nor hemorrhagic complications and no tape protrusion to vagina or urethra were recorded. Cured were 121 (86.4%) patients, 16 (11.4%) patients had minimal residual urinary stress leak and three (2.1%) patient were diagnosed with therapeutic failure. The last three patients had a following successful TVT operation on a three-month interval.

Interpretation of results

The TVT-Obturator is a novel mid urethral sling, designed to cure female urinary stress incontinence and reduce the TVT well-known peri-operative complications. This series results agrees with previously reported efficacy, safety and simplicity of this procedure. However, long-term data is required prior to incorporating this operative technique to the armamentarium of anti-incontinence procedures. No typical surgeon's learning-curve complication reduction rat effect was noticed, but this might be due to former experience with the TVT procedure.

Concluding message

The TVT-Obturator is an easy-to-learn, safe and effective novel anti-incontinence surgery. This method might preserve the TVT well established therapeutic achievements and reduce the bladder penetration rat, the bowel and vascular damage. Cystoscopy and bladder catheterization are not mandatory with this operation. More experience ought to be gained prior to advocating this procedure as a leading one for the cure of female urinary stress incontinence.

References

1. De Leval J: Novel surgical technique for the treatment of female stress urinary incontinence: Transobturator vaginal tape inside-out. European Urology 2003;44:724-730.