

LONG TERM FOLLOW-UP OF THE MALE READJUSTABLE SLING (MALE REMEEEX SYSTEM) FOR THE SURGICAL TREATMENT OF MALE URINARY INCONTINENCE.

Hypothesis / aims of study

Male Slings have been used for the surgical treatment of male incontinence ; however, in many situations the sling may have either an excess or lack of tension producing voiding difficulties or urinary leakage persistency. In 2000 we included a readjustable Sling (Male Remeex System) in our surgical protocol. Specially focus in patients where we need to increase the urethral resistance and still maintain adequate voiding function. The aim of this study was the evaluation of the safety, efficacy and durability of the Male Remeex[®] system (MRS) with 5 years follow up. We focus also in the percentage of readjustments need it.

Study design, materials and methods

20 male patients with moderate to severe SUI were prospectively operated using a readjustable sling (MRS[®]). The origin of incontinence was radical prostatectomy in 18 cases, TURP in 1 and open prostatectomy in another 1. The average follow-up time was 62 months. We focus in this study in patients with a long term follow up and percentage of readjustment in this patients.

Results

All patients were regulated during the early postop., 19 patients required a second regulation under local anesthesia between 1 to 4 months after surgery and 15 patients required more than one delayed regulation. The longer time from placement of the MRS and regulation was 41 months and it was done the same way as a early readjustment. After that 14 patients wear no pads (70%) while another 3 cases showed important improvement (15%) and 3 patients remain unchanged (15%). Of this two patients one old patient suffered a CVA and there was excluded for further regulations while the other was rejected for tumor progression. No meshes or varitensor were removed due to erosion or infection. There were a 6.5% of uneventful intraoperative bladder perforations at the postop. there were two mild perineal haematomas and some patients felt perineal discomfort or pain, which was easily treated with oral medications.

Interpretation of results

Reviewing the readjustability of sling we increase the sling tension even 41 months after the procedure another important information about this study was that a high percentage of the patients(81%) have to be readjust it three times after the procedure.

Concluding message

The MRS[®] allows postoperative readjustment of the suburethral sling pressure, at the immediate or mid-long-term postoperative period helping the surgeon to "correct" the sling support avoiding the possibility of progressive failure with time in most of the cases, which allows the achievement of good results after long term follow up without significant postoperative complications.

<i>Specify source of funding or grant</i>	None
<i>Is this a clinical trial?</i>	Yes
<i>Is this study registered in a public clinical trials registry?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	Monforte Hospital.
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes