PREOPERATIVE URODYNAMIC PARAMETERS IN PREDICTING TVTO OUTCOME IN WOMEN WITH MIXED URINARY INCONTINENCE

Hypothesis / aims of study
Women with Mixed Urinary Incontinence (MUI) who consider undergoing a sling operation are merely provided a general statement of 70% postoperative resolution of their preoperative symptoms of overactive bladder (OAB). This study compared various preoperative personal demographics, symptoms, and Urodynamic Study (UDS) parameters in women with both MUI and Stress Urinary Incontinence (SUI) to the surgical outcome following transobturator tension free vaginal tape (TVTO) in an attempt to identify preoperative values to predict the resolution of both SUI and OAB following sling surgery.

Study design, materials and methods
The preoperative personal demographics and preoperative symptoms of women with SUI and MUI who underwent TVTO at our institute were reviewed. We also reviewed five preoperative UDS parameters: uroflow, cystometric bladder capacity, findings of involuntary bladder contractions and the volumes at which these occur and post void residuals (PVR). These data were retrospectively compared to the patient's postoperative reports of the resolution or persistence of their preoperative SUI and OAB symptoms and were statistically analyzed.

Results
There were total of 236 women in this study ages 33 to 88. Of these, 94(39.8%) had preoperative symptoms of SUI alone while 142(60.2%) had MUI. Among the women with SUI 82 of 94 (87.2%) attained postoperative resolution of their incontinence while in the MUI group the SUI was resolved in 121 of 142 (85.2%) and the preoperative OAB was resolved in 103 of 142 (72.5%).

Interpretation of results
The statistical analysis of the preoperative demographics, and preoperative UDS parameters revealed that only a younger age and larger cystometric bladder capacity were protective against postoperative persistence of OAB symptoms. All other preoperative data were not statistically sufficient to provide preoperative predictive values.

Concluding message
Our data confirm high resolution of SUI symptoms following TVTO in women with preoperative symptoms of either SUI or MUI and 72.5% resolution of OAB among women with MUI. Preoperative personal demographics and UDS data suggest that only a younger age and preoperative UDS findings of larger bladder capacity can serve as a predictor for OAB resolution in women with MUI who underwent TVTO.

References

Specify source of funding or grant
Dr. Berger is a consultant for Ethicon (J&J) USA

Is this a clinical trial? No

What were the subjects in the study? HUMAN

Was this study approved by an ethics committee? No

Was the Declaration of Helsinki followed? No

This study did not require ethics committee approval because Retrospective outcome review done from patients' charts

This study did not follow the Declaration of Helsinki in the sense that As above

Was informed consent obtained from the patients? No