



181 Long-term efficacy and safety of mid-urethral slings A register-based cohort study

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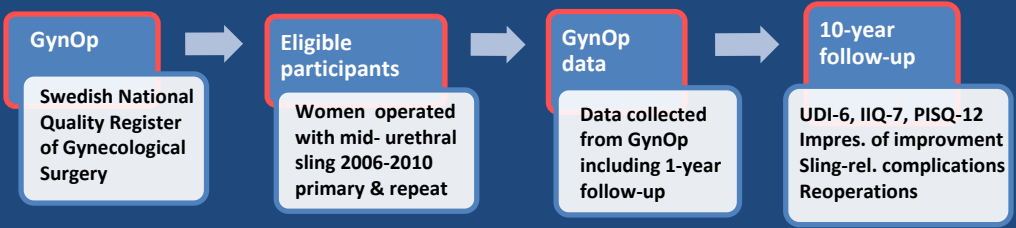
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Aim of the study

There is little evidence concerning the long-term performance of mid-urethral slings as a whole and the potential differences between the retropubic (TVT) and the transobturator (TOT) approach of sling insertion for the treatment of stress urinary incontinence in women.

This study aims to evaluate the efficacy and safety of mid-urethral slings 10 years after the application and compare the two main surgical techniques used.

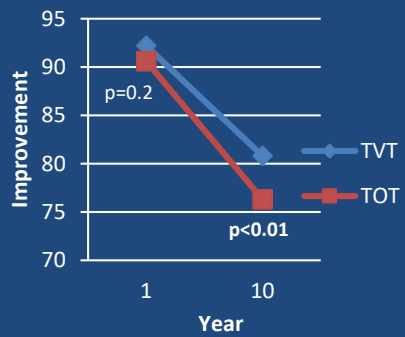
Materials and Methods



Results



10 years (%)	Total	TVT	TOT	P
SUI	36.7	33.4	42.8	<0.01
Urgency	47.6	45.1	52.1	<0.01
UUI	57.8	55.6	61.7	<0.01
Sling-related retention	11.2	11.0	11.6	0.65
UDI-6 (median)	20.0	16.7	22.2	<0.01
IIQ-7 (median)	19.0	19.0	23.8	0.14
PISQ-12 (median)	36.0	36.0	35.0	0.53
Repeated incont. surgery	6.9	5.6	9.1	<0.01
Mesh exposure	2.0	2.2	1.5	0.29
Reop. due to sling	5.6	5.2	6.3	0.25
Any sling-rel. symptoms	24.8	24.3	25.9	0.39
Persisting sympt. at 10 years	17.7	15.9	20.8	0.02



Logistic regression

Preop. retention
Higher BMI
No pure SUI
Previous inc. surg. → Lower efficacy

Predictors for

Preop. retention
Complications 1 year → Lower safety

Interpretation of results

- Adequate long-term performance of mid-urethral slings with small decline in efficacy
- Acceptable complications profile as suggested by the participants' improvement
- TVT presents higher efficacy than TOT at 10 years
- No difference between techniques regarding long-term complications
- Retention preoperatively presents strong predictive value for long-term efficacy and safety of mid-urethral slings and is the most common sling-related symptom at 10 years

