

# W7: Management of Complications of Mesh Sling Surgery - Demonstration through Surgical Video Cases

Workshop Chair: Howard Goldman, United States 27 September 2023 14:00 - 15:30

Start	End	Topic	Speakers
14:00	14:05	Introduction	Howard Goldman
14:05	14:15	case 1	Brian Linder
14:15	14:20	case 2	Tamsin Greenwell
14:20	14:25	case 3	Howard Goldman
14:25	14:35	Discussion	Howard Goldman
			Brian Linder
			Sandip Vasavada
			Tamsin Greenwell
14:35	14:40	Questions	All
14:40	14:45	case 4	Sandip Vasavada
14:45	14:55	case 5	Brian Linder
14:55	15:05	case 6	Tamsin Greenwell
15:05	15:10	case 7	Howard Goldman
15:10	15:15	Discussion	Howard Goldman
			Brian Linder
			Sandip Vasavada
			Tamsin Greenwell
15:15	15:30	Questions	All

#### **Description**

Sling mesh complications are unfortunately something urologists and gynecologists must deal with.

It is critical that they are familiar with the common complications, methods of evaluation and potential surgical management techniques. From a surgical management standpoint well done videos highlighting the critical surgical steps are the next best thing to hands on experience in the operating room.

This workshop will feature multiple surgical videos detailing management of mesh sling complications.

All of the workshop faculty are esteemed experts in this area. All are based at major tertiary referral centers where many such complications are directed. It is important to recognize that there are not randomized, controlled trials in this area. While there are a number of publications they generally report a surgeon or institutions experience. In fact, there may be more than one way to manage some of these complications.

The goal of having a world class faculty is to not only present their experience but elicit discussion, questions, differing ideas from the faculty and the attendees (many of whom may have their own experience with these sorts of complications). The course director, Dr Goldman, is an established expert in this area who has published a number of papers on this topic and edited a book on complications of pelvic floor surgery. Dr Vasavada is the past president of SUFU and also an expert in this area. Dr Tamsin Greenwell is a well-known reconstructive surgeon in London. Dr Brian Linder from the Mayo Clinic in the US is a urologist who works within their urogynecology department and has mesh complications referred to him from around the world.

In a 90-minute time span the goal would be to present 7-8 cases (most different from prior workshop) all with accompanying videos so that attendees can see the very specific details of the surgical management of these complications and have an opportunity to ask the surgeons themselves any questions about the cases and videos. All videos will be professional quality and specifically timed for this course and will be the presenter's own videos – so they will have intimate knowledge of the details of these cases. We plan to cover removal of mesh from the bladder – transvaginally as well as lap/robotically, from the urethra, from the retropubic area for pain, as well as other specific complications.

Key learning points will be how to appropriately evaluate and manage such patients. Specific learnings will come from the videos themselves as well as the questions and discussion that ensue. To that end there will be plenty of time allotted for questions and answers as well as possibly discussion of cases that the attendees have in their own practices. Ultimately, the goal is to share the experience, specifically surgical, of high volume expert sling removal surgeons with others to improve the quality of care that patients worldwide receive. Furthermore, even if attendees ultimately choose not to do these surgeries themselves they will have a good idea of what is possible when these patients are referred out.

#### Aims of Workshop

Many surgeons learn best by observing expert surgeons. Given the number of mesh sling cases performed experts are confronted with complications of such cases. Most patients with such complications who are appropriately treated have resolution of symptoms. The critical point is that those surgeons dealing with such cases have the expertise to successfully manage them. This course will review the management of such complications with a focus on using surgical video demonstrations to specifically review the surgical techniques necessary for successful outcomes.

## **Educational Objectives**

Sling mesh complications are a pressing problem facing urologists and gynecologists. Outside of participating in the OR or on a cadaver the best way to learn surgical techniques is by seeing them - in this case with surgical videos.

We will present a number of videos/cases to illustrate common mesh complication scenarios along with techniques for surgical management. With an expert panel and interaction with the audience the attendees will learn the methods of evaluation and management of these patients. Having the experts and the interaction is critical as there is not a lot of scientific study on these techniques and there may be more than one way of dealing with these problems. The discussion that follows the videos is critical.

These learnings can then be utilised in each attendees clinical practice.

# **Learning Objectives**

- 1. Understand the appropriate evaluation prior to surgical removal of mesh complications
- 2. Learn the surgical techniques for removal of mesh in the bladder, urethra and vagina
- 3. Learn the surgical techniques for dealing with post mesh sling pain after conservative management has failed

# **Target Audience**

Urology, Urogynaecology and Female & Functional Urology

# Advanced/Basic

Intermediate

## **Suggested Learning before Workshop Attendance**

a. Giusto LL, Zahner PM, Goldman HB. Management of the exposed or perforated midurethral sling. Urol Clin N Am. 2019;46:31-40. b. Murphy AM, Goldman HB. Thigh exploration for excision of a transobturator sling. Int Urogynecol J. 2017 May;28(5):793-4. c. Cohen SA, Goldman HB. Mesh perforation into a viscus in the setting of pelvic floor surgery- presentation and management. Curr Urol Rep. 2016 Sep;17(9):64.