STUDY OF SHORT TERM AND LONG TERM EFFICACY OF SINGLE INCISION SLING SYSTEM FOR THE TREATMENT OF FEMALE STRESS URINARY INCONTINENCE (SUI)

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Topic: stress urinary incontinence.

Aim:

Suburethral mini-sling is the surgical mainstay of SUI treatment. We investigated the success and complication rates of this procedure at our hospital.

Materials and methods:

A total of 149 patients, who underwent insertion of mini-sling alone or together with other procedures from 2011 to 2015, were retrospectively enrolled in our study. We telephonically interviewed every patient about current symptoms of incontinence and we considered medical records of body mass index (BMI), age, parity, complications and type of mini-sling. The persistence of SUI through a cough stress test was not verified. Chi-square test and t student test were used for statistical analysis.

Results:

Mini-sling was reported as successful in 89.3% of cases independently from the follow-up period (p=0.16). Our complication rate was 1.3%, without any sling extrusion [1]. We did not find a statistical difference in success rate between mini-sling alone or together with other procedures (p=0.83), patient age (p=0.71), BMI (p=0.89) [2], type of mini-sling (p=0.60). A higher success rate was found in nulliparous/primiparous vs multiparous (p=0.007).

Conclusions:

Mini-sling attained high subjective success rates at 5 year follow up. We will necessitate to objectivate these rates and evaluate patient's urinary habits with an uroginecologic visit. Its association with very low percentage of complications was proved. Multiparity was identified as a risk factor for failure.

[1] Hammett J et al. Short-term surgical outcomes and characteristics of patients with mesh complications from pelvic organ prolapse and stress urinary incontinence surgery. Int Urogynecol J. 2014 Apr;25(4):465-70.

[2] Tchey DU et al. Influence of Obesity on Short-term Surgical Outcome of the Transobturator Tape Procedure in Patients with Stress Urinary Incontinence. Int Neurourol J. 2010 Apr;14(1):13-9.