Single Incision Mid-urethral Sling for Treatment of Female Stress Urinary Incontinence.

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Abstract

OBJECTIVES: To present the longitudinal outcomes in an observational cohort of patients who had undergone treatment of stress urinary incontinence with a single incision mid-urethral sling (MUS).

METHODS: A prospective, observational study of all female patients who had undergone surgical intervention with the MiniArc MUS was performed. The surgical candidates underwent history and physical examination and urodynamic testing, as indicated. Quality of life questionnaires (Urogenital Distress Inventory [UDI-6] and Incontinence Impact Questionnaire [IIQ-7]) were administered preoperatively. The salient operative data were recorded. The patients were followed up postoperatively for evidence of treatment success and adverse events. The patients completed the UDI-6, IIQ-7, and Female Sexual Function Index questionnaires at 1 and 12 months after treatment.

RESULTS: From September 2007 to October 2008, 120 patients underwent placement of the MiniArc MUS for the treatment of stress urinary incontinence. The mean patient age was 58.4 years. The mean body mass index was 27.2 kg/m(2). The mean preoperative daily pad use was 2.4. The mean preoperative IIQ-7 and UDI-6 score was 86.58 and 62.5, respectively. Of the 120 patients, 108 (90%) completed a minimum follow-up period of 12 months. Of these 108 patients, 101 (94%) were cured/dry. The mean postoperative pad use was 0.2 (P < .001). The mean IIQ-7 and UDI-6 score was 13.32 (P < .001) and 12.5 (P < .001), respectively. The Female Sexual Function Index results demonstrated no discomfort with intercourse in 49%, occasional discomfort in 9%, and frequent discomfort in 2%. The remaining 40% of our patients were not sexually active.

CONCLUSIONS: Our results have shown that the MiniArc MUS offers excellent outcomes that are durable at 1 year after treatment.

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PMID: 21167559 [PubMed - as supplied by publisher]