

Surgical Approach and the Outcomes for Female Recurrent Urinary Incontinence Treatment

Introduction and Objective: To estimate the surgical approach and cure rates for female recurrent urinary incontinence treatment.

Materials and Methods: A retrospective study was performed of 56 patients presenting with recurrent urinary incontinence after the initial surgery treated at the Vilnius University Hospital "Santariškių klinikos" from 2003 to 2011. All patients were divided into the groups considering the initial and the second surgical approach for urinary incontinence treatment: 1 – Burch colposuspension operation after vaginoplasty (28 patients), 2 – TOT after vaginoplasty (8 patients), 3 – TVT after vaginoplasty (3 patients), 4 – TOT after Burch colposuspension operation (13 patients), 5 – TVT after Burch colposuspension operation (4 patients). The first, second and third groups were compared between each other, as well as fourth and fifth comparing the risk factors which may influence the outcomes. The surgery for recurrent urinary incontinence results were evaluated by using UDI-6 and IIQ-7 short forms questionnaires average after the 4,7 years. The responses were received from 44 patients. The urine continence outcomes and the procedure satisfaction rates were assessed. Outcomes were classified as cured, improved or failed.

Results: Comparing patients age between the groups, the statistically significant value ($p=0,002$) was received comparing the first group with the second group that means, that patients in the first group were younger, than in second. Overall cure and improvement results in the 1-st group were 73,6%, 2-nd group – 66,6%, 3-rd – 100%, 4-th – 75%, 5-th – 100%. Satisfied with procedure in the 1-st group were 68,4%, 2-nd group - 50%, 3-rd - 100%, 4-th - 75%, 5-th - 100% of patients.

Conclusions: Best cure rates for female recurrent urinary incontinence was observed in TVT after vaginoplasty group and TVT after Burch colposuspension operation group. The results in TVT after vaginoplasty group were influenced of lesser BMI values, lesser number of deliveries and perineal ruptures in these group. The results in TVT after Burch colposuspension operation group were influenced by younger patients' age and lesser number of hysterectomy in the past in these group. The TVT procedure comparing with other surgical approaches is an effective treatment for female recurrent urinary incontinence.