Is Tension-Free Suburethral Sling (TOT) Set to Become the New Gold Standard for Treatment of Stress Urinary Incontinence? Our Experience with TOT in Treatment of Female SUI

Introduction and Objectives: Stress urinary incontinence (SUI) has a significant impact on the quality of life for many women. Up to now, we present our experience in the correction of SUI or associated with previous surgery for pelvic floor prolapse by tension-free suburethral sling (TOT).

Materials and Methods: Review of first 125 cases of SUI with suburethral sling placement (May 2007 - December 2011). In 103 patients initially used transobturator tension-free mesh and in 6 of them, for failure of TOT, we opted for adjustable devices, including 22 cases in which, besides the use of TOT, was associated the correction of pelvic organ prolapse.

We analyzed the following variables:

- · History of pelvic floor pathology
- Parity number
- Number of pads used daily, before and after treatment
- Quality of Life Questionnaire (ICQ-SF)
- Early and late complications
- · Measurement of residual volume
- Continence medium to long term

Results:

The retrospective cohort study reveals:

- the mean age was 55.74 years.
- most of the patients (84.3%) had between 2 and 4 vaginal pregnancies (n = 70).
- cystocele II-III was detected in 55.31% (n = 26).
- Medium pads/day used was 3.16
- the 69.6% of patients (n = 87) achieved total continence.
- the 4.8% (n=6) showed significant clinical improvement, using 0-1 pads / day.
- failure in 4% (n=5).
- novo detrusor overactivity appeared in 13.6% (n=17).
- intraoperative complications were minor
- there were no early complications in 75.2% (n = 94)
- in postoperative complications; no complications occurred in 57.6% (n=72), in one case, mesh infection (retired), in 12.8% of cases presented symptoms of urgency (n=16), high residual urine measured by 4% (n=5) and 8% (n=10), there were other minor complications.

Conclusions: In our experience, the use of tension-free suburethral sling as a treatment for mild to moderate for SUI is an effective and reproducible method, with few complications and improves the quality of life in 74% of patients.