

Unmoderated Posters

Urinary Incontinence

UP-79

Retrograde Leak Point Pressure Measurement Improves Outcomes of the Virtue Male Sling for Post-prostatectomy Stress Urinary Incontinence

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Introduction and Objectives: Stress urinary incontinence (SUI) following radical prostatectomy is a common problem with resultant impairment of quality of life (QoL). We report our single-institution experience, including efficacy, safety, and the impact on QoL using the Virtue® Male Sling, as well as the advantage of per-operative measurement of the retrograde leak point pressure (RLPP).

Methods: Retrospective evaluation of continence rate and complications in 31 men consecutively treated with the Virtue Male Sling for post-prostatectomy SUI between March 2009 and November 2012. Per-operative measurement of RLPP was carried out in the last 13 patients. Follow-up schedule was at 2, 6, and 12 months, then yearly. Patient Global Impression

of Improvement (PGI-I) scale was used to measure subjective satisfaction at the last follow-up visit.

Results: Mean (range) follow-up was 17.2 (2.2-45) months. Mean (range) age was 66 (53-75) years. 11 (36%) patients had mild, 14 (45%) patients had moderate, and 6 (19%) patients had severe SUI. Of the first 18 patients who did not have RLPP measured during the surgery, 11 (61%), 3 (17%), and 4 (22%) patients had no improvement, improvement (0-1 pad per day [ppd] or >50% pad reduction), and cure (0 ppd) of their SUI respectively, compared to 2 (15%), 1 (8%), and 10 (77%) of the last 13 patients who did have RLPP measured. 11 (61%) of the 18 patients who did not, compared to 1 (8%) of 13 patients who did have RLPP measured had subsequent surgical treatments for unimproved SUI. 5 (28%) of the 18 patients who did not, compared to 10 (77%) of the 13 patients who did have RLPP measured were very satisfied with their device.

Conclusion: The Virtue Male Sling is a valuable treatment option for mild and moderate post-prostatectomy SUI. Per-operative RLPP measurement significantly improved cure and satisfaction rates.