

# FEMALE STRESS URINARY INCONTINENCE: Comparison of Two Surgical Techniques Over the Years, with a Minimum Follow-up of 10 Years.

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## MATERIALS AND METHODS

A prospective randomized study was conducted from June 2007 to February 2013, including **502 women**:  
The follow-up period concluded in 2024.



**RESULTS** median follow-up of 166 months (14 years).

	TOT	SIU	p-value
Age (years)	57.86 ± 11.3	59.08 ± 11.6	0.243
Parity	2 (0-7)	2 (0-8)	0.61
Urgency Urinary Incontinence (UUI)	69 (23.5%)	58 (27.75%)	0.032
Hospital stay (days)	3.47 (1-24)	2.15 (1-8)	<0.001
Surgical time (minutes)	27.34 ± 11.2	18.43 ± 10.3	<0.001
Follow-up time (months)	177 (26-241)	154 (29-202)	<0.001
Previous POP surgery	52 (17.74%)	64 (22%)	0.0007
Previous SUI surgery	25 (8.5%)	5 (2.39%)	0.0042

## COMPLICATIONS

	TOT (293)	SIU (209)	p-value
Early complications			
Acute urinary retention (AUR)	29 (9.89%)	5 (3.39%)	0.004
Urinary tract infection (UTI)	2 (0.68%)	1 (0.47%)	0.148
Hematoma	3 (1.02%)	0	0.179
Bladder perforation	0	3 (1.43%)	0.996
Late complications			
Symptomatic vaginal erosion*	3 (1.02%)	7 (3.34%)	0.066
Bladder perforation (TUR)	3 (1.02%)	6 (2.87%)	0.124
Persistent SUI	14 (4.77%)	49 (23.4%)	<0.001
“De novo” UUI	22 (7.5%)	16 (7.65%)	0.951
Persistent UUI	32 (10.92%)	9 (4.3%)	0.007
Post-void residual >150cc (CLI)	6 (2.04%)	2 (0.95%)	0.548
Post-void residual >150cc (urethrolisis)	2 (0.68%)	1 (0.47%)	0.769

\*Symptomatic vaginal erosion requiring mesh removal, according to ICS/IUGA 3BdT4S2 coding.

## SUCCESS RATE

	TOT	SIU	p-value
Objective success	251 (85.66%)	142 (67.94%)	<0.001
Reintervention for SUI	17 (5.8%)	30 (14.35%)	0.0012
PGI 1 and 2	240 (81.9%)	153 (73.2%)	0.020

## CONCLUSION

Further prospective studies are needed to confirm or refute the differences observed in our study, which favor the transobturator suburethral sling in terms of long-term success rates.