

## **TRANSOBTURATOR TAPE MONARC FOR FEMALE STRESS URINARY INCONTINENCE. EXPERIENCE IN 246 PATIENTS**

### Hypothesis / aims of study

Urinary incontinence is a disease with a high incidence which has a negative impact on quality of life. Its diagnosis increases gradually with age. The highest survival and longevity of current women necessarily lead to further increase of this pathology in the future. Every year more and better treatments are presented for both medical and surgical correction of urinary incontinence, however the correct choice will depend on a good diagnosis in each case. Stress urinary incontinence (SUI) is a common condition that is often treated effectively with surgical procedures when non-invasive treatment fails. While several surgical options exist, Transobturator Tape (TOT) procedures have gained popularity in the last decade due to relatively diminished invasiveness, simplifying the technique, decreasing bladder, vascular and intestinal injuries. The objective is to evaluate the security and effectiveness of the TOT in the female incontinence surgical treatment according to our experience.

### Study design, materials and methods

Retrospective study of 246 patients underwent TOT at Urology department between April 2006 to April 2012. TOT Monarc® technique for the treatment of SUI was used. The mean age was 53 years old, parity 1.94 and body mass index (BMI) 29.43. We evaluated the variables: age, BMI, parity, hysterectomy and previous incontinence surgery, ASA class, prolapse repair, grade of stress urinary incontinence and surgeon experience. The SUI was classified as follows: Grade 0 is defined as no incontinence; Grade 1 incontinence occurs with coughing, sneezing, or laughing; Grade 2 is spontaneous incontinence with some control; and Grade 3 is no control. Statistical analysis was performed with SPSS® with a significance level of  $p < 0.05$ .

### Results

The mean operative time was 39.88 minutes with a mean hospital stay of 36 hours. The functional results were evaluated with International Consultation on Incontinence Questionnaire-Urinary Incontinence Short Form (ICIQ-UI SF) and Patient Global Impression of Improvement before surgery and the first control 1 month, 12 months and 24 months after surgery. Functional results, with at minimum follow up of 24 months, were successful in 172 (71.5%) patients. No intraoperative complications were observed in 96.7%, during hospitalization in 94.3% and after hospital discharge in 75.4% of the patients. No mortality was recorded.

### Interpretation of results

In our series TOT Monarc® technique for the treatment of SUI revealed good efficacy, safety, low morbidity and no mortality. Surgeon experience is one of most important predictors of successful outcome (statistical significance  $p < 0.05$ ). Others determining factors of success were (statistical significance  $p < 0.05$ ): young patients, low BMI and parity, grade 1-2 of SUI before surgery, absence of hysterectomy or previous incontinence surgery, ASA class 1-2, without simultaneous colporrhaphy

### Concluding message

Suburethral transobturator tension-free Monarc® technique for the treatment of stress urinary incontinence is effective but not deprived of complications. Only surgeons who have been properly trained in the use of this procedure should be performing this surgery, as surgeon experience is a significant predictor of successful outcome. Candidates for the procedure must be carefully selected. Patients must be informed about the success rates and complications of the surgical procedure.

### Disclosures

**Funding:** Not declare **Clinical Trial:** No **Subjects:** NONE