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## RELIABILITY AND RESULTS OF MINISLING PROCEDURE THROUGH A SINGLE VAGINAL INCISION AND LOCAL ANAESTHESIA

### Hypothesis / aims of study

Surgical treatment for stress urinary incontinence (SUI) with midurethral slings is a globally-accepted procedure. Many urological departments have a lack of time for surgical procedures, although there is a high demand for treatment. We have to look for efficient alternatives, and a procedure that can be performed ambulatory and with local anaesthesia is welcomed.

### Study design, materials and methods

Retrospective study of a sample with adult female patients with SUI who underwent the implantation of a midurethral sling (MiniArc Precise™) through a single vaginal incision and with local anaesthesia between January 2014 and October 2015. BMI, pad use, ICIQ-SF before and after surgery (IQ), quality of life with the visual analogue scale (VAS) before and after IQ, pain during the IQ measures by VAS, postsurgical symptoms, postsurgical continence, grade of satisfaction with the procedure.

### Results

15 patients. Minimum follow-up 8 months, maximum 24 months, median 15. Median age 51 years (range 39-78). Median BMI 29.26. Median daily use of pads 4. ICIQ-SF before IQ (median) 17, QoL VAS (median) 9. Pain during IQ (median) VAS 2. 12 patients became continent (80%), 3 remained incontinent. Associated symptoms: Local pain 0/14, mesh extrusion 0/14, UTI 0/14, de novo urgency 0/14 (4 patients had persistent urgency that was already present before IQ, and was managed with anticholinergics/mirabegron). Postsurgical ICIQ-SF (median) 3, QoL (median) VAS 1. 12/14 would repeat the procedure and 13/14 would recommend it to a friend/relative.

### Interpretation of results

Long-term studies have shown that anti-incontinence procedures with minislings have their role in the treatment of stress urinary incontinence, with similar results to those achieved with conventional procedures. A meticulous anesthesia and a careful information to patients before treatment are the most important facts to facilitate its implantation at the outpatient surgery.

### Concluding message

Anti-incontinence procedure with minislings and local anaesthesia is a reproducible and reliable technique high satisfaction rates and good tolerability. Clinical results are similar to those achieved with spinal/general anaesthesia.

### Disclosures

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