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DOES URETHRAL PRESSURE MEASUREMENT CORRELATE TO THE OUTCOME OF INCONTINENCE SURGERY?

Hypothesis / aims of study
Resting urethral pressure profile is routine in many urodynamic units, used for assessment of stress incontinence. It is time and effort consuming and its yield is controversial for diagnosis and even more controversial for prediction of surgical outcome. Herein, we assessed its value in the prediction of outcome of surgery.
Study design, materials and methods
60 women were randomized to fascial sling or TVT. Urodynamics were performed preoperative, 6 months and annual thereafter. After water filling and voiding cystometry, resting urethral pressure profile was performed while sitting. Automated catheter pulling, at rate of 1 mm/sec was adopted. Averaged readings were obtained. Comparison of MUCP in success and failure, between the sling and TVT was performed, utilizing ANOVA.
Results
Preoperative MUCP and FUL were 72.9±27.9 cmH2O and 2.4±0.7 cm. At last follow up were 71.1±20.7 cmH2O and 2.7±0.7 cm. No significant differences in both MUCP and FUL were encountered among patients subjected to sling or TVT. The relationship of the outcome of surgery and UPP parameters showed no statistical difference. No significant effect for the success of surgery, the duration of follow up and the interaction of outcome and time over MUCP ($p = 0.82, 0.56$ and 0.69 respectively) or FUL ($p= 0.82, 0.11$ and 0.67 respectively).

Interpretation of results
UPP parameters did not have significant effects on the outcome of anti-incontinence surgery
Concluding message
The routine use of resting UPP has no added value in terms of prediction of success of incontinence surgery. It does not help with follow up and adds to the time and cost of the examination.

References
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FUNDING: Institutional
CLINICAL TRIAL REGISTRATION: This clinical trial has not yet been registered in a public clinical trials registry.
HUMAN SUBJECTS: This study did not need ethical approval because Part of routine work and continuation of a previous trial but followed the Declaration of Helsinki Informed consent was obtained from the patients.