Tension-free Vaginal Tape: The New Treatment of Female Urinary Stress Incontinence

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Objective: To evaluate the results and morbidity of TVT procedure in genuine urinary stress incontinence in women with or without pelvic organ prolapse.

Materials and methods: Eleven women, aged 35 - 68 years, with urodynamically confirmed primary genuine stress incontinence were treated with TVT procedure. Preoperative evaluation included history, physical examination and urodynamic study.

Results: Eight cases (72.7%) had pelvic organ prolapse. Posterior perineorrhaphy with or without anterior colpoperineorrhaphy or vaginal hysterectomy were performed together with TVT procedure in 8 cases (72.7%). The mean operative time was 35.0 ± 2.24 min. The mean hospitalization in the case of TVT procedure only was 1.0 day. The mean hospitalization in the case of TVT with other vaginal operations was 3.86 days. Eight cases (72.7%) had pelvic organ prolapse. The catheterization days was 2.0 ± 0.5 days. One case experienced urinary retention requiring catherization for 7 days (from over-correction and required urethral dilatation). No patients had ladder perforation of severe blood loss. No healing defect or rejection of prolene mesh was found. At the follow up time of 3 months (10 cases), 6 months (3 cases), 9 months (3 cases), we found no cases of recurrence of stress incontinence.

Conclusion: Our early results revealed that TVT is effective and safe in the treatment of stress urinary incontinence in the women with or without pelvic organ prolapse.