

Tension-free vaginal tape (TVT) in the treatment of urinary stress incontinence: 3 years experience involving 256 operations.

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Tension-free vaginal tape (TVT) in the treatment of urinary stress incontinence: 3 years experience involving 256 operations

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Abstract

Objectives: To report the outcome and complications of a series of tension-free vaginal tape (TVT) operations and compare the results with the literature. *Materials and methods:* A total of 256 cases with a minimum follow-up time of 3 months (May 1998–September 2001) were included (193 isolated TVT, 23 combined with vaginal hysterectomy and 63 combined with prolapse surgery). These cases included 21% of the patients presenting with mixed incontinence, 14% with sphincter deficiency and 9.8% with recurrent incontinence. The isolated TVT were carried out under local anesthesia an ambulatory procedure, the others were done under spinal anesthesia. *Results:* Almost all the patients underwent a clinical check-up after 3 months and 1 year and also underwent urodynamic exploration; they were then questioned by means of a questionnaire after 2

and 3 years. The global cure rate was 90, 91, 83 and 87%, respectively. The authors observed 6.4% of recurrences between 3 months and 1 year and 7.2% between 2 and 3 years. For mixed incontinence at the three first check-ups, the cure rate was 75, 85 and 60%, respectively, with 7.4 and 20% of recurrences between these two intervals. The cure rates of the patients who had presented with sphincter deficiency were 76, 79 and 73%, respectively, with 16% recurrences during the first year. In the case of recurrent incontinence, a cure was obtained in 72 and 71% of cases, with 18% of recurrences. The complications consisted of 5.5% cases of perforated bladder, 0.4% hematomas of the Retropubic space, 3.1% urinary infections, 0.4% urethral injuries, 5.1% transient urine retention, 12.0% de novo urinary urgency and 20% de novo dysuria. It should be noted that half of the pre-operative urgencies had disappeared after the operation. No defective healing and rejection phenomenon was observed. *Discussion:* The authors reviewed the results reported in 35 articles, and compare these with their own results. They also reviewed all the complications encountered, account for them and suggested how they can be avoided. There are discrepancies between the various studies, particularly with regard to the complications. *Conclusion:* This minimally invasive operation should be further assessed so that it can demonstrate its effectiveness, and become the "Gold standard". Randomized studies are awaited with this in view.



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Keywords

TVT; Urinary stress incontinence; Complications

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