

Laparoscopic Burch Colposuspension for Stress Urinary Incontinence in the setting of the BSUG mentorship scheme - short to medium term outcomes.

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Background

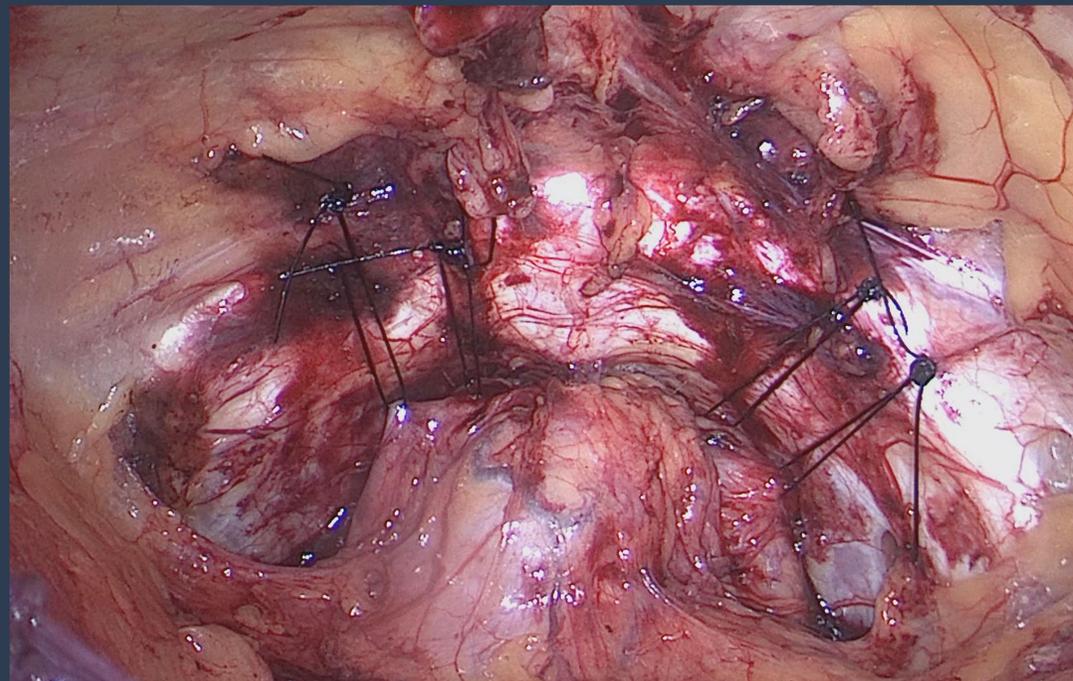
Burch Colposuspension is an effective procedure for stress urinary incontinence historically performed as an open procedure and first described by John C. Burch in 1961. It was first performed as a laparoscopic procedure by Vancaillie in 2009. In this procedure the anterior vaginal wall is sutured to the iliopectineal ligament elevating the bladder neck. This increases the urethral closure pressure in an effort to treat stress incontinence. Due to the pause on mesh procedures and increasing interest in laparoscopic procedures for incontinence, the British society of Urogynaecology (BSUG) developed a Non-Mesh Continence Surgery Mentorship Scheme.

Aim

To determine short to medium term outcomes of laparoscopic burch colposuspension undertaken in the setting of the BSUG mentorship scheme.

Methods

Ten patients underwent this procedure and all agreed to be included in this study. Baseline characteristics on each patient were taken on the day of surgery and the BSUG quality of life questionnaire was completed alongside a patient global impression survey. Peri/postoperative outcomes were recorded and the patients were contacted at 3, 6 and 12 months to complete a follow up quality of life survey.



The 4 non-absorbable sutures from the vaginal mucosa to Coopers Ligament elevate the bladder neck in a sling like fashion.

Results

There were no major operative complications or conversion to laparotomy. Three patients were discharged with an indwelling catheter and had successful removal within 7 days. Of the 20 total sutures used, 4 were misplaced into the bladder. This was noted intraoperative via cystoscopy and sutures resited. In three cases the suture was removed and resited. ICIQ and PGI scores are below which show a significant improvement in scores and symptoms.

Conclusion

In this case series we have shown that undertaking a laparoscopic Burch Colposuspension within a mentorship learning environment is safe with highly effective medium term outcomes equivalent to those previously published literature. Our team advocate cystoscopy a routine check as part of this procedure.

| ICIQ questionnaire | ICIQ score | Std. Deviation | Std Error Mean | Sig. |
|-----------------------|------------|----------------|----------------|-------|
| Baseline | 16.4 | | | |
| Baseline vs 3 months | 2.2 | 4.367 | 1.381 | 0.000 |
| Baseline vs 6 months | 2.9 | 4.725 | 1.352 | 0.000 |
| Baseline vs 12 months | 3.0 | 3.831 | 1.211 | 0.000 |

| PGI-I Severity | Normal | Mild | Moderate |
|----------------|--------|------|----------|
| 3 months | 9 | 1 | 0 |
| 6 months | 9 | 1 | 0 |
| 12 months | 9 | 1 | 0 |

| PGI-I Bother | Not at all | Somewhat | Moderately |
|--------------|------------|----------|------------|
| 3 months | 9 | 2 | 0 |
| 6 months | 9 | 1 | 0 |
| 12 months | 9 | 1 | 0 |

| PGI-I Improvement | Very much better | Much better | A little better |
|-------------------|------------------|-------------|-----------------|
| 3 months | 8 | 2 | 0 |
| 6 months | 9 | 1 | 0 |
| 12 months | 9 | 0 | 1 |

Baseline ICIQ scores compared with 3,6 and 12 months and BSUG Patients Global Impression of Improvement for Incontinence