

Does ISTOP TOMS™ male sling remain efficient over time?

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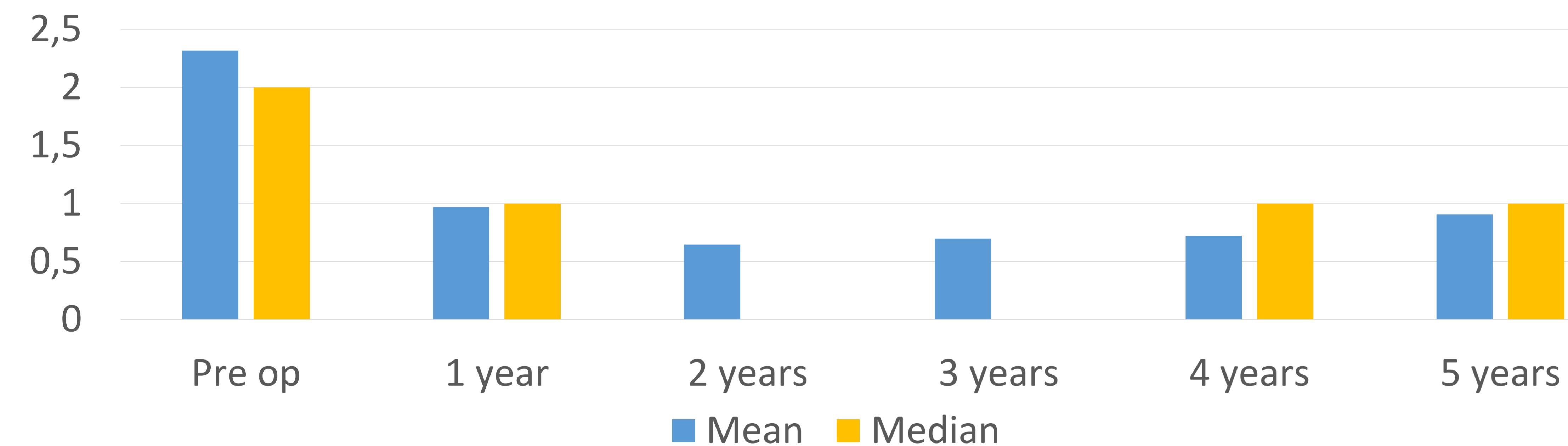
Objectives

Male sub-urethral slings are widely used for the treatment of post-prostatectomy urinary incontinence (PPUI). However, the results of male sling implantation have only been evaluated through short-term studies, and long term outcomes are still unknown. Our objective was to assess the long term efficacy of ISTOP TOMS™ male sling implantation for PPUI management.

Materials & Methods

A multicenter prospective observational study was carried out. All patients implanted with an ISTOP-TOMS™ sling between 2007 and 2012 were included. Indications for ISTOP-TOMS™ implantation was PPUI without bladder dysfunction on urodynamics, with mild to moderate incontinence (24h pad test <400g), and without history of pelvic radiation therapy. Follow-up was performed through a physical examination every year and a phone interview for the last follow-up. The primary endpoint was the number of daily pad use. The statistical analysis was performed using SAS 9.2.

Number of pads per day



Results

One hundred patients were considered in the present analysis with a median follow-up of 60 months [19-78]. A significant reduction of daily pad use and a better quality of life according to questionnaires were found up to 5 years ($p<0.001$). At 3 years follow up, 51% of the patients were dry and 90% used 0 to 1 pad daily, but these rates dropped to 38% and 71% at 5 years, respectively. Nevertheless, quality of life questionnaires and treatment satisfaction remained high at 5 years. No severe complication was recorded.

(number of patients)	1 year (95)	2 years (51)	3 years (43)	4 years (32)	5 years (21)
Dry (no pad)	38%	50%	51%	44%	38%
0 to 1 pad	77%	90,2%	88,4%	84,4%	71,4%
Improved	21%	28%	26%	22%	29%
Failure	21%	22%	23%	34%	33%
Deterioration per year		4%	9,3%	9,3%	14%

Conclusions

Implantation of the ISTOP TOMS™ for PPUI management in patients without radiation therapy and presenting mild to moderate incontinence appears safe and effective in the long term. However, our results are in favor of recurrence of incontinence with time. These data highlight the need of long term studies in this field, for optimal patient information and clinical decision making.