

MALE INCONTINENCE SLING

Introduction

Stress incontinence is the leakage of urine with abdominal pressure, usually triggered by lifting, coughing or sneezing. This is a common condition in females after childbirth but may also occur in men after prostate surgery. Most patients will improve with pelvic floor muscle exercises to recruit and strengthen muscles around the bladder outlet. Some patients continue to have bothersome leakage and may wish to consider surgical treatment when:

1. The leakage is distressing and causes restriction of usual activities due to embarrassment or fear of having accidents in public
2. Being dependent on pads or pull-ups is expensive and inconvenient, especially when travelling, hiking or playing competitive sport

What are the alternatives?

Sling

A synthetic tape is placed just below the bladder outlet to apply some pressure and change the angle of the urethra. This is mildly compressive but not occlusive and helps increase resistance to reduce leakage. It works best to control mild-moderate losses of less than 300 ml a day.

Artificial urinary sphincter (AUS)

This implantable device is highly effective for moderate-heavy leakage of greater than 300 ml a day and has three components:

- (1) The first is a fluid-filled cuff that occludes the urethra circumferentially.
- (2) The second is a small pump that is placed in the scrotum.
- (3) The third is a balloon reservoir to store fluid that travels in and out of the cuff.

To urinate, the pump is squeezed to move fluid from the cuff into the balloon and open the urethra. Fluid returns to the cuff passively over 30-60 seconds to close the channel off.

Sling video (2:31 mins) <https://www.youtube.com/watch?v=nXFTDfFTpwU>

AUS video (1:36 mins) https://www.youtube.com/watch?v=bA2qd5e_fkC

What does the procedure involve?

A sling is inserted under general anaesthesia through a small incision in the perineum (area between the scrotum and the anus). The wide middle section is placed over the urethra, and the two ends of the tape are passed through an opening in hip bone on either side. The tape is a type of mesh that allows tissues to grow into and hold it in place. A catheter is placed into the bladder to drain the urine overnight and removed the next day.

What are the risks of surgery?

Common (>50%)

Minor stinging or burning for 1-2 days after catheter removal
Bruising, swelling and discomfort in and around the perineum

Occasional (1-10%)

Infection
Gaps in the stitches or wound
Retention - inability to pass urine due to urethral swelling
Urethral atrophy - tissue shrinkage resulting in loose sling and leakage
Urethral erosion - requires sling removal

Rare (<1%)

Anaesthetic or cardiorespiratory problems requiring intensive care
Chest infection, clots in the legs and lung, stroke, heart attack, death

What should I do before surgery?

- Do not eat, drink, or chew gum for 6 hours before surgery
- If you are on blood thinning medication, discuss this with Dr Ooi
- If you are obese, losing weight makes surgery easier and improves outcomes

What should I expect after surgery?

The usual hospital stay is 1 night. Sips of fluid are provided initially, followed by light diet. The nurses will assist with daily activities and remove the urinary catheter the following morning.

Discharge information

Avoid squatting, straining or lifting for 6 weeks after surgery. Do not soak the area in any baths or swim as this may increase infection risk. Most people take 1-2 weeks off work to convalesce. Please contact Dr Ooi's rooms, the hospital, ward or nurse manager if you have any concerns, such as excessive pain, bleeding, difficulty emptying your bladder, wound issues, fever or feel unwell. General advice is also available on our website in the Procedures section.

Appointments

Dr Ooi will see you 3-4 weeks after surgery to check on your progress. If you live remotely and things are going well, you may prefer to have a telephone call instead of a face-to-face consultation.

Perth - please come with a full bladder so you can do a flow test

Albany - please do not come with a full bladder as there is no flow machine