

# O16

## THE IMPACT OF DIFFERENT STRESS URINARY INCONTINENCE SURGERIES ON FEMALE SEXUAL FUNCTION; A COMPARISON OF TENSION-FREE VAGINAL TAPE (TVT), COLPOSUSPENSION AND AUTOLOGOUS FASCIAL SLING

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### Introduction

The aim of this study was to retrospectively evaluate the effect of different surgeries for stress urinary incontinence on sexual function in women.

### Materials and methods

This retrospective analysis included 90 women who had undergone surgery for stress urinary incontinence over a 10-year period. A database of pre-completed validated pelvic floor questionnaires: Electronic Personal Assessment Questionnaire (ePAQ), was used to analyse pre-operative and postoperative results from each cohort who had surgery in our unit. Answers to forty-two questions in the sexual function dimension of the ePAQ were explored. Data was analysed in accordance with four ePAQ domains within the sexual function dimension: urinary, vaginal, dyspareunia and general sex life. Domain scores and impact factor were calculated. Data was collated and analysis completed using paired T-test to compare pre and post-operative values. The one-way ANOVA test was used to compare general sex life scores between the three different procedures.

### Results

The level of sexual activity post-operatively did not change for the three cohorts of patients. All three procedures showed improvement in the impact of urinary symptoms on sexual activity (p values = 0.0001, 0.014, 0.01, respectively.) Dyspareunia following both TVT and slings was shown to have significantly improved in the post operative period. On analysis of the general sex life domain, improvement was noted following autologous fascial sling (p=0.005) and colposuspension (p=0.0006). One-way ANOVA revealed a significant effect of the choice of SUI procedure on general sex life,  $F(2,51)=7.117$ ,  $p<0.0018$ .

### Conclusion

Our findings show that sexual function improves after surgery for SUI. The choice of surgery may have a different impact on sexual function. It is therefore important that women are adequately counselled regarding this during the consent process. Further research using larger study numbers is needed to analyse this key area.

### References

1. Kershaw, V. and Jha, S. (2021) 'Impact of incontinence on female sexual function', *Sexual Function and Pelvic Floor Dysfunction*, pp. 23–34.

2. Glass Clark, S.M. et al. (2020) 'Effect of surgery for stress incontinence on female sexual function', *Obstetrics & Gynecology*, 135(2), pp. 352–360.

3. Brubaker L, Chiang S, Zyczynski H, Norton P, Kalinoski DL, Stoddard A, Kusek JW, Steers W; Urinary Incontinence Treatment Network. The impact of stress incontinence surgery on female sexual function. *Am J Obstet Gynecol*. 2009 May;200(5):562.e1-7. doi: 10.1016/j.ajog.2008.11.017. Epub 2009 Mar 16. .