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DAY-CASE ARTIFICIAL URINARY SPHINCTER IMPLANTATION FOR POST- PROSTATECTOMY INCONTINENCE: A PROSPECTIVE PILOT STUDY

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Introduction

Implantation of AUS has been traditionally offered with an overnight hospital stay. The aim of this prospective, comparative pilot study was to assess the feasibility and outcomes of the AUS procedure in a day- case setting.

Patients and methods

We included patients having primary or redo AUS surgery over an 18-month period. We excluded patients with previous urethral erosion of AUS, urethroplasty, or high anaesthetic risk. All patients were offered day case surgery. Patients who declined or could not have day case surgery for logistical reasons had standard care with overnight stay and formed the control group for the study.

Primary outcome was the proportion of failed discharges in the day-case group. We also compared baseline characteristics, complications, and continence at 1 year post surgery.

Results

Twelve patients consented for day case procedure and 13 patients had standard overnight care. Mean age was 69.5 years (range 58-79). Twenty-two patients (88%) had primary AUS, whereas 3 (12%) had redo procedures.

There were no statistically significant differences between the groups in baseline demographics. Median number of pads/24h was 5 in the day-case group and 4 in the overnight group (p=0.33).

Eight of 12 patients (66.7%) in the day case group were successfully discharged on the same day. Failed discharges were due anaesthetic reasons (n=2), high post void residuals resolved spontaneously (n=1) and intraoperative superficial urethral injury (n=1).

All patients in the day case group and all but one in the standard of care group were socially continent (0-1 pads) at 1 year post procedure. Two patients operated on the standard of care group, but none of the day cases, had a late (>6 months) AUS explanation due to infection/erosion.

Conclusion

Implantation of AUS is feasible and safe in selected patients with comparable continence outcomes to those with standard overnight stays.

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