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RADIOTHERAPY IN MEN WITH POST PROSTATECTOMY INCONTINENCE - BEFORE OF AFTER ARTIFICIAL URINARY SPHINCTER INSERTION?

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Introduction:

Pelvic radiotherapy for prostate cancer negatively impacts continence outcomes with artificial urinary sphincters (AUS). There is no literature data comparing the effects of radiotherapy before and after sphincter insertion.

Materials and Methods:

We retrospectively reviewed case notes of men who underwent AUS insertion between 2014 and 2018 due to incontinence following prostate cancer treatment. Patients were categorized into three groups: no radiotherapy (control), radiotherapy before AUS insertion (pre-AUS RT), and radiotherapy after insertion (post-AUS RT). All men also had surgical treatment.

Results:

Among 63 men (mean age 70), 69 artificial sphincters were inserted with a mean follow-up of 57 months. Fifteen men had previous failed stress incontinence surgery.

Best continence results were observed in the post-AUS RT group (100%, but only 3 men), followed by the control group (85% 23/27 men), and pre-AUS RT group (62% 13/21 men), though not statistically significant ($p = 0.10$).

Explantation rates were lowest in men without prior stress incontinence surgery, 15% (7/48 men) vs. 40% (6/15 men), $p=0.034$, but had no association with the three study groups ($p = 0.826$). Causes included erosion and traumatic catheterisations elsewhere, infection and fluid leak.

Two men, previously continent for 3 and 7 years, developed metastatic disease during follow-up and required two pads per day shortly after initiating androgen deprivation therapy.

Conclusion:

This preliminary data suggests that administering radiotherapy after artificial urinary sphincter insertion might balance treatment and long-term functional outcomes. Additionally, the introduction of hormone therapy may negatively impact continence.