

OP3

BASELINE CHARACTERISTICS AND QUALITY OF LIFE (QoL) OF THE INITIAL COHORT OF PATIENTS PRESENTING IN A NEWLY ESTABLISHED MESH CENTRE

K. Kapriniotis, A. Pati-Alam, A. Mercado-Campero, R. Nobrega, A. Noah, M. Pakzad, J. Ockrim, T. Greenwell, H. Gresty
University College London Hospital, UK

Introduction

Specialist complex mesh centres (CMC) have been established and the first cohorts of patients have had mesh removal. We report the indications, baseline characteristics and QoL data assessed through appropriate questionnaires.

Methods

A prospectively kept database of all Urology patients treated at our CMC was analysed. Urinary symptoms were assessed by BFLUTS, pain by VAS score and BPI-short form (0-10), and quality of life by EQ5D5L Level Sum Score (5-25). We detail QoL data for our whole cohort, sub-analysed by indication for mesh removal (urinary tract extrusion, vaginal exposure, chronic pain/ LUTS).

Results

PROMS were available in 40 patients who had partial or complete mesh removal over 20 months. Mean age was 62.2 years (range 43-84). Twenty- three patients had TVT, 14 TOT, 2 prolapse mesh and 1 bladder neck Gore-tex.

Thirteen patients had urinary extrusion, 12 vaginal exposure and 2 urinary extrusion and vaginal exposure. Pain +/- LUTS was the indication for removal in 13 patients.

Overall, patients reported moderate-severe LUTS at presentation with mean BFLUTS score 35.6 (+/- 12.3). Mean BFLUTS was not significantly different among the three groups ($p=0.45$). Median VAS score for pain was 4.0 (IQR:2,6.5) across all indications. Median VAS score was lower for the vaginal exposure group (2.5 vs 5 and 4.5 for the other two indications), but this did not reach statistical significance ($p=0.15$). Similarly, BPI median score (interference with daily activities) was 3.8 (IQR:1.1,7.25) across all indications and did not differ significantly among the three groups ($p=0.20$). Finally, the median EQ5D5L Level Sum Score questionnaire was 10.5 (IQR:8,13.5) across all indications and was not significantly different among the three groups ($p=0.81$).

Conclusion

Regardless of indication, patients with mesh related complications suffer moderate to severe LUTS, pain and impact on QoL. We continue to collect baseline and post op data for future reporting.