

## LAPAROSCOPIC ASSISTED TOTAL REMOVAL OF RETROPUBIC TAPE

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### Introduction

The retropubic tape was first introduced for the management of stress urinary incontinence in 1995 by Ulmsten (1). In the ensuing years, mid-urethral tapes became the gold-standard procedure for management of SUI (2). There are many reported associated complications and more recently in the United Kingdom there has been a pause in use of mesh for management of incontinence (3). Surgical management of complications involves total or partial tape excision. This video demonstrates a case of laparoscopic assisted total removal of retropubic tape.

### Design

The laparoscopic assisted total removal of retropubic tape was recorded and edited to show the important steps of the procedure. The patient agrees to publication of images and videos and completed a medical illustration consent form.

### Results Case

A 56-year-old woman was referred with suprapubic pain, radiating to vagina and posterior aspect of legs. There was also a history of dyspareunia and tape exposure and she underwent 2 previous tape excisions of the vaginal portion of the tape, resulting in removal of approximately 2 cm of vaginal portion of the tape. Cystoscopy showed no mesh perforation and MRI scan showed no abnormality. The MDT supported the patient's choice for total removal of the tape. This video presents a laparoscopic assisted total removal of retropubic tape and shows the technique for laparoscopic dissection into the retropubic space, excision of the tape and removal of the suprapubic portion of tape.

### Conclusion

A laparoscopic technique can be utilised for total removal of retropubic tape. In this case a total removal was achieved.

### References

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