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ANTERIOR COLPORRHAPHY AND THE KELLY PPLICATION – BACK TO THE FUTURE

F. Altaf

Objective:

The mesh procedure was introduced in 1998 and was described by some as the “gold standard” treatment for female stress urinary incontinence. On the 10th of July 2018, there was a national pause by NHS UK to perform mesh procedures for stress urinary incontinence. Therefore, we offered the anterior colporrhaphy and Kelly plication procedure to treat stress incontinence, where women are undergoing prolapse surgery. This study's objective was to see the outcome of anterior colporrhaphy and Kelly plication for stress urinary incontinence.

Design:

It was a prospective study with follow-up.

Methods:

27 patients were recruited, who underwent "anterior colporrhaphy with Kelly plication" between the 1st of May 2017 till the 30th of May, 2018 at our institution. The patient's characteristics, operative data and outcome were reviewed. Questionnaire ICIQ USIF (Short form) were given to the patient at the appointment dates. All the data was compiled and analyzed on Microsoft Excel 2010®. Techniques are varied. We used two mattress sutures, one placed at the level of the mid urethra and second suture at the bladder neck. We used a nonabsorbable suture for plication.

Results:

The average age was 48.96 years, and average BMI was 30.07.06 (22%) patients had postoperative urinary retention, voiding problems resolved in 5 (18%) 6 months later. Kelly suture was removed in 1 (3%). One patient had failure and underwent Burch Colposuspension. Five (18%) patients had urge urinary incontinence; and needed anticholinergics. The success rate was 92.34 % at two years.

Conclusion:

We found that "anterior colporrhaphy and Kelly plication" appears to be effective and safe for surgical treatment of "stress urinary incontinence along with prolapse". In the current situation, this conventional surgical procedure can be offered to the women, who have stress urinary incontinence and undergoing prolapse surgery. Keywords: Pelvic organ prolapse, Kelly plication, stress urinary incontinence.

References

1. Abdel-Fattah M, Ramsay I, Pringle S. Lower urinary tract injuries after transobturator tape insertion by different routes: a large retrospective study. BJOG. 2006;113(12):1377-1381. doi:10.1111/j.1471-0528.2006.01097.
2. American College of Obstetricians and Gynecologists, Clinical Management Guidelines: Urinary Incontinence in Women. Number 63, June 2005.
3. Stress Urinary Incontinence: Simplifying Therapy, J Obstet Gynecol India Vol. 60, No. 5 :September / October 2010 Pg 389 – 391;

4. Kelly HA. Incontinence of urine in women. *Urol Cutan Rev* 1913; 17:291–293
5. Latthe PM, Foon R, Tooza-Hobson P. Transobturator and retropubic tape procedures in stress urinary incontinence: a systematic review and meta-analysis of effectiveness and complications. *BJOG*. 2007;114:522–31. *Int Urogynecol J Pelvic Floor Dysfunct*. 1996; 7(2):81-5; discussion 85-6.