



Abstract #374: The Role of Video-Urodynamics in the Evaluation of Post-Prostatectomy Incontinence

Hypothesis / Aims Of Study

- Ongoing debate concerning the optimal investigation for patients with post-prostatectomy incontinence (PPI)
- No clear indications for the use of standard urodynamics (SUDS) or videourodynamics (VUDS) for the investigation of PPI

Aim: Explore the role of SUDS and VUDS in the investigation of PPI and determine if they have an impact on its management

Study Design, Materials And Methods

- Retrospective chart review of UDS database of male patients with PPI: between 2012-2023, single high volume tertiary center
- UDS performed in every patient with PPI when surgery considered
- Comparison of clinical and UDS diagnoses
- Analysis of management of all patients who underwent UDS
- Comparison of findings on fluoroscopy vs. cystoscopy for patients with suspected urethral stricture

Results

Table 1. Clinical And Urodynamic Diagnoses

SUI	256 (100%)
OAB	74 (29%)
UAB	2 (1%)
USI	227 (88.7%)
DO/DOI	145 (56%)
DUA	80 (31.3%)
Decreased compliance	11(4.3%)
MUCP [average (range)]	40.3 cm H ₂ O (0, 100)
Urethral functional length [average (range)]	10.1 mm (2, 27)
Urethral stricture, de novo	13 (5.1%)
Urethral stricture, recurrent	5 (2.0%)

Table 2. OAB vs. DO/DOI

No OAB with DO/DOI	70 (32.3%)
OAB, no DO/DOI	35 (16.1%)
OAB with DO/DOI	54 (24.9%)

Figure 1. Known urethral stricture

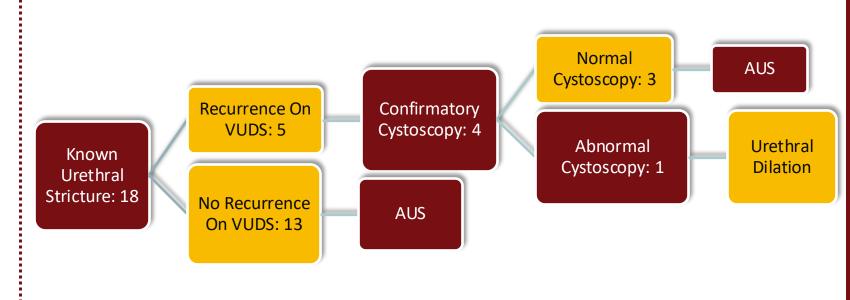
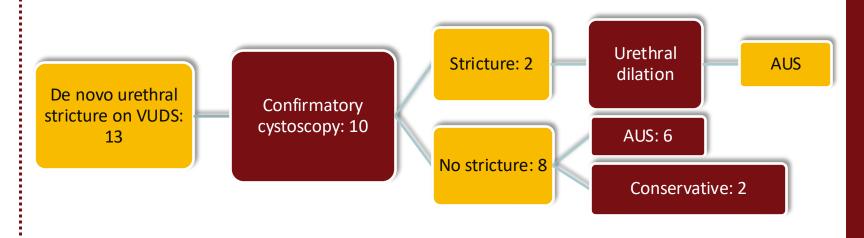


Figure 2. De Novo Urethral Structure



Interpretation Of Results

- UDS: important in the investigation of PPI
- Can assist in clinical decision making
- Potentially avoided unnecessary surgery in 12.8% of patients
- Weak correlation between clinical diagnosis of OAB and DO/DOI
- One of the first studies to explore the role of VUDS for the evaluation of PPI
- No identification of high-risk patients
- Urethral narrowing in a minority of patients
- Weak correlation between cyscoscopy and VUDS for the diagnosis of urethral stricture
- SUDS + cystoscopy: more instrumentation and higher cost
- VUDS should be included in the investigation of every patient with PPI in whom surgery is being considered
- Limitations: retrospective, single center study

CONCLUSIONS

- UDS: valuable diagnostic tool for the assessment of PPI
- Important impact on the management of male SUI
- VUDS more advantageous than SUDS
- SUDS + flexible cystoscopy: good alternative to VUDS
- Need for updated guidelines

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