

## POST PROSTATECTOMY STRESS URINARY INCONTINENCE EVALUATION. IS THE URODYNAMIC TEST A GOOD PREDICTOR OF INCONTINENCE SEVERITY?

### Hypothesis / aims of study

Assess whether this urodynamic study correlates with the severity of urinary incontinence in patients with stress urinary incontinence after radical prostatectomy. Assessment carried out through comparisons with a validation method for quantifying urinary incontinence, the 24-pad test.

### Study design, materials and methods

A survey of 23 patients who underwent radical prostatectomy that developed urinary incontinence was performed. 19 of these patients were from a single university hospital and 04 from a private clinic. The study included patients complaining of stress urinary incontinence for at least 1 year after radical prostatectomy and who underwent conventional urodynamics and / or 24-pad test. The relationship between the variables age, International Consultation on Incontinence Questionnaire (ICIQ), Abdominal Leak Point Pressure (ALPP), Vesical Leak Point Pressure (VLPP), Maximum urine flow rate (Qmax), and 24-pad test were evaluated by statistical study using the RMLE method. All patients included in the study were continent before undergoing radical prostatectomy and were not subjected to any procedures or physical therapy for correction of urinary incontinence. The Pad test previously performed followed the International Continence Society [1] protocols

### Results

All patients had urinary incontinence, yet none showed warning signs of urodynamics obstruction. 8 patients had no mention of the pad test in their respective charts and 11 patients had no mention of ICQI. The average VLPP was 87.6 cm H<sub>2</sub>O (SD 26.3 cm H<sub>2</sub>O) and Mean Qmax was 14.8 ml / s (SD: 5.1 ml / s). The mean pad weight test was 534.3 g (SD: 321.6 g). The ICIQ mean was 16 (SD: 3.2) and the mean age was 65.1 years (SD: 7.9). There was no statistical correlation between ALPP and pad test ( $r = -0.17$ ) and VLPP and pad test ( $r = -0.10$ ). There was no correlation between ICIQ and VLPP and ALPP ( $r = -0.32$  and  $r = 0.28$ ) respectively.

### Interpretation of results

ALPP and VLPP is typically used for evaluating intrinsic sphincter deficiency [2]. ALPP has also been correlated with subjective urinary incontinence in men undergoing prostatectomy [3]. This study noted, based on statistical evaluation, that the measurement of ALPP and VLPP has no relation with Pad Test and, furthermore, does not correlate with ICIQ.

### Concluding message

This study demonstrated that urodynamic evaluation by ALPP and VLPP does not correlate with objective urinary incontinence in patients undergoing radical prostatectomy. These findings suggest that urodynamic testing is a bad predictor of the severity of urinary incontinence and degree of sphincter failure in these patients.

### References

- 1 Schafer W, Abrams P, Liao I, et al. 2002. Good urodynamic practices: Uroflowmetry, voiding cystometry, and pressure-flow studies. *Neurourol Urodyn* 21:261-74.
- 2 Cespedes RD, McGuire EJ. 1998. Leak point pressures. In: Nitti VW, editor. *Practical urodynamics*. Philadelphia: Saunders. pp 94-107.
- 3 Ficazzola MA, Nitti VW. 1998. The etiology of post-radical prostatectomy incontinence and correlation of symptoms with urodynamic findings. *J Urol* 160:1317-20.

### Disclosures

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