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PREOPERATIVE FACTORS FOR PROGNOSIS ARTIFICIAL URINARY SPHINCTER IMPLANTATION OUTCOMES.

Hypothesis / aims of study Despite relatively high rate of complications, artificial urinary sphincter (AUS) implantation is still the best option in patients with severe stress urinary incontinence. The aim of the study was to analyze factors influencing the success of implantation.

Study design, materials and methods
A total of 34 patients with severe stress urinary incontinence after prostatic surgery were treated with an AMS 800 artificial urinary sphincter between November 2004 and April 2013. Among them 20 (58,8%) required prior surgery due to posterior urethral stricture.In all patients the evaluation of urethral lumen, continence and quality of life was performed. In order to evaluate impact of various factors Spearman's rank correlation coefficient was calculated. The cure was defined as ≤ 1 pad per day, improvement as the reduction of incontinence of more than 50%, success was defined as the sum of cure and improvement.

Results The mean age was 67 years and the mean follow-up was 44 months. The mean time after prostatic surgery was 24 months. The cure and improvement rate were 93.6% and 3.1% respectively, thus success rate was 96.9%.

Interpretation of results
There was strong correlation between presence of posterior urethral stricture and preoperative pad number (R=0,818, p<0,05). Also there was significant correlation between postop and preoperative pad number (R=0,583, p<0,05), postop pad number and age (R=0,655, p<0,05). Moreover, there was significant correlation between complications and time to urinary incontinence treatment (R=0,344, p<0,05).

Concluding message
Age, pad number and time to urinary incontinence treatment influence AUS implantation outcomes.

Disclosures
Funding: no **Clinical Trial:** No **Subjects:** NONE