

## THE FUNCTIONAL OUTCOME AND LEVEL OF SATISFACTION FOLLOWING REPAIR OF VVF

### Hypothesis / aims of study

To assess urological, sexual, and bowel function following successful repair of vesico-vaginal fistulae of varying aetiology

### Study design, materials and methods

18 women mean age 48.8 years (range 25-69) having successful repair of vesico-vaginal fistula had telephone or in person interviews at a mean of 48.3 months (range 8-108) following successful repair of VVF (14 vagina and 4 abdominal).

All women completed the UDI-6 and IIQ-7 to assess urological function, the LARS score to assess bowel function, an EQ5D to assess overall function and a health thermometer score to assess general wellness.

Sexually active patients were asked to complete the PISQ-12 to assess sexual function. All women were also asked to complete these questionnaires retrospectively for their status immediately prior to VVF repair.

### Results

	Pre-VVF Repair (Mean +Range)	Post VVF repair (Mean + Range)
UDI-6 Score	16.33 (4-18)	8.11 * (0-18)
IIQ-7 Score	19.22 (0-21)	4.50* (0-21)
LARS Score	8.89 (0-40)	9.17 (0-39)
Sexually active N (%)	0	13 (66.7)
PISQ 12	N/A	17 (3-23)
EQ5D score	5 (1-5)	2 (0-5)*
Health thermometer' (EQ5D)	33.11 (0-82)	73.61 (10-100)*

\* P< 0.01

### Interpretation of results

Successful repair of vesico-vaginal fistula significantly improves urinary symptoms and distress, as well as general well-being and quality of life. Sexual function is restored in 66.7%. There are no adverse effects upon bowel function.

### Concluding message

Successful repair of vesico-vaginal fistula significantly improves urinary symptoms and distress

### Disclosures

**Funding:** nil **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** University College London Hospitals **Helsinki:** Yes **Informed Consent:** Yes