

W6: Current surgical management of postprostatectomy incontinence – workup, options and decision making

Workshop Chair: Ralf Anding, Switzerland 07 September 2022 09:00 - 10:30

Start	End	Topic	Speakers
09:00	09:05	Introduction	Ralf Anding
09:05	09:15	Pathophysiology	Craig Comiter
09:15	09:25	Diagnostics	Vincent Tse
09:25	09:35	Fixed slings	Vincent Tse
09:35	09:45	Adjustable devices	Wilhelm Hübner
09:45	09:55	Classic sphincter	Craig Comiter
09:55	10:05	Adjustable sphincters	Wilhelm Hübner
10:05	10:15	Decision making	Ralf Anding
10:15	10:30	Cases with TED	Ralf Anding
			Vincent Tse
			Craig Comiter
			Wilhelm Hübner

Aims of Workshop

Delegates will acquire a current overview of surgical options and limits of postprostatectomy incontinence therapy. Various sling devices have been developed over the last 15 years and can now be evaluated with long-term studies. Adjustable devices offer the opportunity of adaptation to a changing degree of incontinence during follow-up. The specific role of fixed and adjustable slings as well as balloons in this field will be defined. The mainstay of treatment of more severe stress incontinence is still the AMS 800 sphincter prosthesis. However, new and also adjustable implants have been introduced in recent years and will be covered. Case discussions will give practical views of complex aspects as well as troubleshooting.

Educational Objectives

The workshop has been run with the same title at the 2021 online meeting and received an excellent evaluation. Therefore, the faculty looks very much forward to present their lectures in an updated form to a live audience. This will allow for a better interaction both within the faculty and - more importantly - with the participants. Special attention was paid to multidisciplinarity and internationality, but only the latter could be implemented due to the particular urologic topic. The outline of the workshop has proved to be valuable both for participants who are in the beginning of conducting male incontinence surgery and for the advanced practitioners as the workshop is structured in a meaningful way. Starting with important aspects of pathophysiology and diagnostics, the various available devices are presented with a focus on particular advantages and disadvantages, based on clinical data and personal experience.

Especially the high level of personal experience of the faculty in this field provides direct translation of the topics covered into clinical practice. The presentations will not only present published data but very practice-oriented information that take account of the individual needs of the patients. Today, growing attention has to be paid to the elderly population. Moreover, particular regional or national interests have to be covered with respect to the international audience.

Learning Objectives

Up-to-date information of surgical options and techniques of male incontinence therapy

Target Audience

Urology

Advanced/Basic

Advanced

Suggested Learning before Workshop Attendance

Treatment of incontinence after prostatectomy using a new minimally invasive device: adjustable continence therapy. BJU Int. 2005;96(4):587-594

Adjustable continence therapy (ProACT): evolution of the surgical technique and comparison of the original 50 patients with the most recent 50 patients at a single centre. Eur Urol. 2007;52(3):680-686

Contemporary Management of Postprostatectomy Incontinence European Urology, 2011;59(6):985-996

Telephone-delivered quality of life after 365 male stress urinary incontinence (SUI) operations. Int Braz J Urol. 2016;42(5):986-992

A prospective study evaluating the efficacy of the artificial sphincter AMS 800 for the treatment of postradical prostatectomy urinary incontinence and the correlation between preoperative urodynamic and surgical outcomes. Urology 2008;71:85-89 The role of male slings in post prostatectomy incontinence: ICI-RS 2015. Neurourol Urodyn 2017;36(4):927-934

Urinary incontinence in men. Der Urologe 2015;54:887-900

Targeting Moderate and Severe Male Stress Urinary Incontinence with Adjustable Male Slings and the Perineal Artificial Urinary Sphincter: Focus on Perioperative Complications and Device Explantations. Int Neurourol J. 2017;21(2):109-115

Antibiotic Coating of the Artificial Urinary Sphincter (AMS 800): Is it Worthwhile? Urology. 2017;103:179-184

Risk Factors for Failure of Male Slings and Artificial Urinary Sphincters: Results from a Large Middle European Cohort Study. Urol Int. 2017;99(1):14-21

Complications and Short-Term Explantation Rate Following Artificial Urinary Sphincter Implantation: Results from a Large Middle European Multi-Institutional Case Series. Urol Int. 2016;97(2):205-11

Male incontinence surgery in the 21st century: past, present, and future. Curr Opin Urol. 2010;20(4):302-308

Mid-term outcomes of a male retro-urethral, transobturator synthetic sling for treatment of post-prostatectomy incontinence: Impact of radiotherapy and storage dysfunction. Neurourology and Urodynamics 2017;36(4):1147-1150

Is pre-operative urodynamic bladder function the true predictor of outcome of male sling for post prostatectomy incontinence? World J Urol 2021;39(4):1227-1232