Removal of obstructing synthetic sling from a urethra : english and spanish version

Pizarro-Berdichevsky, J., Goldman, M. P., & Goldman, H. B. (2016). Removal of obstructing synthetic sling from a urethra: English and Spanish version. International urogynecology journal, 27(12), 1929-1931. <10.1007/s00192-016-3098-1> Accessed 12 Jan 2021.

Abstract

Introduction and hypothesis: Urethral perforations after synthetic midurethral sling (MUS) placement are uncommon. Transvaginal removal is an option. The objective of this English and Spanish video is to demonstrate removal of an MUS that had perforated the urethra and the concomitant urethral reconstruction. Methods: A 66-year-old woman with a history of an anterior and posterior colporrhaphy and a retropubic MUS 12 years earlier presented with difficulty voiding, recurrent urinary tract infections, and mild stress incontinence (SUI). Physical examination revealed tenderness on the anterior vaginal wall (AVW) without mesh extrusion. Cystourethroscopy showed urethral perforation, distal to the bladder neck and urodynamics demonstrated an obstructive pattern. The patient wished to undergo transvaginal sling removal and reconstruction. Results: The mesh was deep in the AVW perforating the urethra and the vaginal portion was completely removed. The video demonstrates several tips on how to remove a perforating MUS and subsequent urethral reconstruction. Ten months postoperatively the force of stream returned to normal, with no further UTIs, no evidence of fistula, and rare SUI. Conclusions: Urethral perforation with an MUS can be successfully treated with removal of any mesh in proximity to the urethra and urethral reconstruction via a completely transvaginal approach..

Keywords

Suburethral slings, Urethra, Surgical mesh, Foreign-body migration, Urinary incontinence, Stress, Vaginal surgery.