

Advances in Women's Health

A New Surgical Approach to Female Stress Urinary Incontinence Now Under Way

Millions of women suffer from stress incontinence, the involuntary leakage of urine during exercise or certain movements such as coughing, sneezing, or laughing. In the past, women had to manage this problem with pads and adult diapers, but recent advances in surgery have made it possible to treat the conditions with a high rate of success.

The impact of urinary incontinence can cause a loss of one's sense of well-being and quality of life. Additionally, it carries a financial cost. Lifetime medical costs for each woman treated for stress incontinence can reach nearly \$60,000, excluding the cost of personal hygiene products which are not covered by medical insurance. Ironically, women spend more money on diapers and pads for incontinence than for menstruation.

France's Dr. Emmanuel Delorme pioneered the transobturator sling in 1999. It was introduced to the European market. It soon became popular because the procedure is simpler and faster, with less risk of complications, than alternative procedures. In the last two years over 11,000 women have been successfully treated for stress incontinence with Mentor's transobturator sling.

Minimally invasive sling surgery for the management of female stress urinary incontinence was introduced in the early 1990s. Las Colinas Medical Center in Irving was the first medical center in the Southwest region of the United States to offer the procedure.

Innovations in minimally invasive sling surgery for the management of female stress urinary incontinence seek to improve safety, efficacy, and patient satisfaction. The transobturator approach is one of the latest developments in the field. John J. Zavaleta, M.D., medical director of Las Colinas OB/GYN is participating in a national multi-center trial designed to confirm perioperative risks.

Clinical experience indicates that the transobturator approach shares the same success rate as the standard, more complex procedures. Yet this new approach avoids the need to operate in the proximity of major blood vessels and the bowel significantly reducing operative risks, complications and recovery time. Most patients are able to manage any discomfort with over-the-counter analgesics.

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