

压力性尿失禁(stress incontinence)_泌尿外科疾病库 PDF转换可能丢失图片或格式 , 建议阅读原文

https://www.100test.com/kao_ti2020/610/2021_2022__E5_8E_8B_E5_8A_9B_E6_80_A7_E5_c22_610249.htm Among the 103 women suffering from stress incontinence, 60 were assigned to Composix, 28 to TVT, and 15 to TVT-O. Only patients presenting a complete set of data were included in the analysis. Preoperative workups included medical history, clinical examination, a 24-hour pad test, FPSUND (symptom score), satisfaction and impact incontinence quality of life (I-QOL) questionnaires. Objective changes in SUI were the primary end point. whereas other outcome variables such as symptoms, quality of life questionnaires and satisfaction scale were our secondary end points. Clinical check ups were conducted at three months, every six months for two years and then annually up to five years. The objective result was considered successful when the absolute value of incontinence after treatment was ≤ 2 g per 24 hours. Results showed that the median follow up of the cohort was 24 months. The median I-QOL scores for the Composix, TVT and TVT-O prior to surgery were 57, 55, 49 respectively, and 106, 106, 109 at 24 months. Similarly, the FPSUND scores were initially 12, 11, 12 and 4, 1, 2 at follow-up, whereas the 11 point-scale satisfaction score improved from two to nine for all groups. The median pad weight was 26g, 66g and 20 g prior to surgery. only four patients had persistent urinary stress incontinence following surgery. The authors said their study did not detect a significant difference between the Composix, TVT and TVT-O slings for the cure of female stress

incontinence at a mean follow-up of 24 months. quot. they added.
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