

## Session VI, Urology I

### **SV11: LAPAROSCOPIC BLADDER NECK SUSPENSION IN CHILDREN WITH REFRACTORY URINARY INCONTINENCE BASED ON BLADDER NECK INSUFFICIENCY**

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**Background** The aim of this study is assess the results of laparoscopic colposuspension in children with urinary incontinence.

**Materials and methods** 18 laparoscopic consecutive procedures with a follow up > 1 year were analysed. The mean age was 13.5 years (9–17 years). All patients had urinary incontinence (UI). In one third constipation was treated. Six patients had history of recurrent UTI's. All patients failed urotherapy for at least 3 years. In 7 patients antimuscarinics were used because of urge without success. Bladder neck insufficiency was proven by repeated perineal ultrasound and video-urodynamic study. The laparoscopic procedure was performed preperitoneally by means of three 5-mm ports. The anterior wall of the vagina, lateral to the bladder neck, was mobilized and bilaterally sutured to Cooper's ligament. A catheter was left for 3–5 days after surgery.

**Results** The mean operation time was 90 min (range 56–150 min). Intraperitoneal CO2 leakage occurred in 1 patient without need for conversion. One patient needed temporary CIC due to urinary retention. Full success (dryness) was achieved in 6 and in partial response in 6 after 6 months. After 12 months 8 were dry and 5 showed improvement. Four out of 6 were free of UTI's and antibiotic prophylaxis was ceased.

**Conclusions** Laparoscopic colposuspension can be used to treat refractory UI in a very selective group with bladder neck insufficiency when non-invasive methods fail.

**Key words** colopsuspension, urinary incontinence, laparoscopy, children