

The first UK experience in using urethral bulking agents to treat men with Stress Urinary Incontinence

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INTRODUCTION

Stress urinary incontinence (SUI) can occur as the result of radical prostatectomy surgery, with 10% on average still experiencing SUI 1-year post surgery. Urethral bulking injections are an established treatment for SUI in women with much fewer associated morbidity. Outcomes on their use in men however are limited.

We present the **first UK series in the use of urethral bulking agents** in treating men with SUI and assess whether any subsets within patient groups best predict a positive efficacy with treatment.

METHODS

Between 2014 – 2018, 24 men (mean age 67, range 56 – 82) were identified.

- 22 post RALP, 1 post BNI, 1 post AP resection

All underwent a cystoscopic urethral bulking injection under general anaesthetic.

- Bulking agent injected proximal to urethral sphincter
- 3 and 9 o'clock
- Mean volume injected 4mls

Bulking agents used:

- Deflux, Dexell or Bulkamid

All patients were followed up for a minimum of 12 months (range 12 – 48 months).

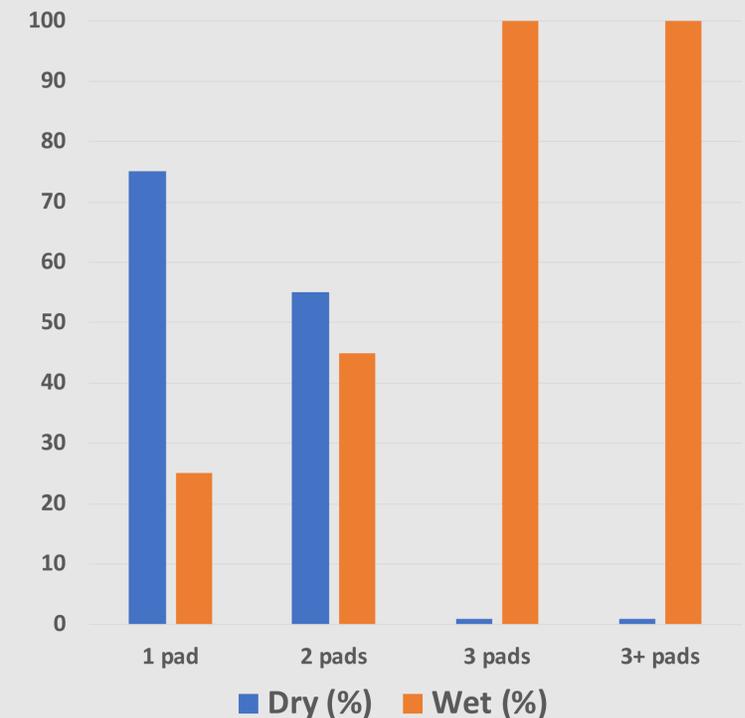


RESULTS

Mean pad usage prior to bulking was 2.7 per day (range 1-6). Post injection mean pad usage was 2.0 per day (range: 1-6).

6 men underwent a repeat urethral bulking procedure due to decreasing efficacy. The mean time to repeat injection was 12 months.

There were no Clavien-Dindo complications reported in this cohort.



CONCLUSIONS

Our data show for the first time that in UK men, cystoscopic urethral bulking is a low risk procedure which:

- **Provides benefit in men with mild SUI** (up to 2 pads per day),
- Efficacy inversely proportional to pre-op pad usage.

Urethral bulking agents are not effective in men with:

- Moderate to severe incontinence (over 2 pads per day)
- Previous radiotherapy, for whom other treatment options should be considered.

Urethral bulking agents appear to **last 12 months** before patients require a top-up.