Factors predictive of voiding problems following insertion of tension-free vaginal tape

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Objective

To identify predictive factors of urinary retention following a tension-free vaginal tape (TVT) procedure, so that patients may be better advised of their risk of undergoing catheterization and tape release.

Method

A retrospective review of women who underwent a TVT procedure over five years. Patient age, pressure flow rate, concomitant vaginal surgery, and the form of anesthesia used for the surgery were analyzed. The Mann–Whitney U Test and logistic regression were used to explore the effect of these factors.

Results

Because of the small sample size, none of these factors were shown to be significantly predictive of postoperative voiding difficulty. However, there could be a correlation between postoperative voiding difficulty and concomitant posterior vaginal repair as well as lower preoperative flow rate.

Conclusion

No significant predictive factors were found, but there was a trend toward long-term voiding difficulty for women who underwent posterior vaginal repair and women with low preoperative flow rates.