

OUTCOME MEASURES MOST COMMONLY USED IN THE LITERATURE TO ASSESS STRESS INCONTINENCE SURGERY IN WOMEN OVER THE PAST 5 YEARS: CAN WE COME TO SOME AGREEMENT TO IMPROVE OUR REPORTING?.

Hypothesis / aims of study

To review the literature over the past 5 years to determine the most commonly used outcome measures (OMs) after stress urinary incontinence (SUI) surgery

Study design, materials and methods

A PUBMED search of all English-written, full text, articles using the Mesh term “Urinary Incontinence, Stress/surgery” published between 2010-2015 on SUI surgery in women was performed. A list of randomized trials (RCT), prospective (P) and retrospective (R) studies was obtained. Exclusion criteria were men, children, neurogenic patients, and non-English written articles. Two reviewers with FPMRS training reviewed selected articles for both objective and subjective OMs used in each study.

Results

Ninety-nine articles met inclusion criteria. Articles were from RCT (55%), P (40%) or R (5%). The yearly average of published articles remained stable over time at 17/year (RCT 9, P 7, R 1). The most common subjective OMs among 42 questionnaires were: PGI-I (29%), UDI-6 (25%), ICIQ-SF (23%), IIQ-7 and KHQ (both at 22%). UDI (38%) and IIQ (31%) questionnaires (short and long forms) were the most used overall. (Chart 1) Of note, 26% of articles used customized questionnaires designed by the authors. The most common objective OMs were: stress test (with a variety of protocols) (65%), pad test (43%) but with a wide dispersion in standardization, followed by urodynamic studies and need of further treatment (20%) (Chart 2). The mean number of OMs per trial was 2.85 for P, 2.45 in RCT and 2 in R. Some questionnaires were used preferably in certain countries. Most common publishing Journals were International Urogynecology (35%), The Journal of Urology (11%) and Obstetrics & Gynecology tied with European Urology (5%).

Chart 1

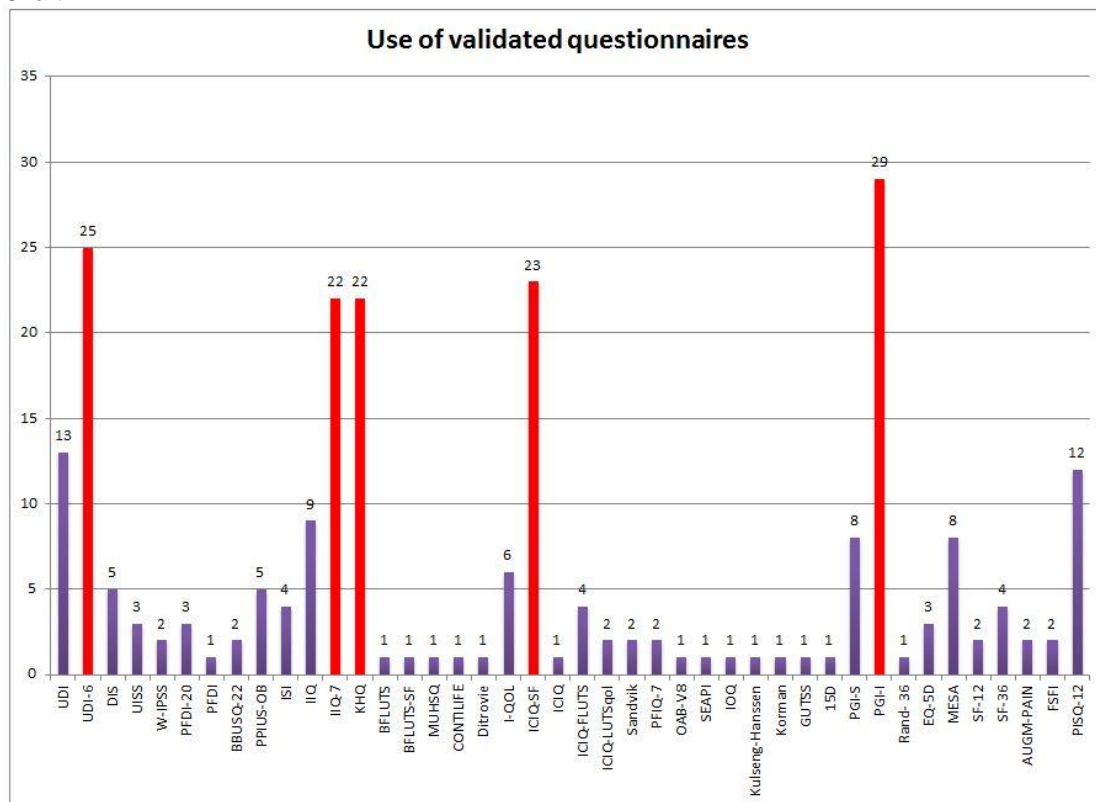
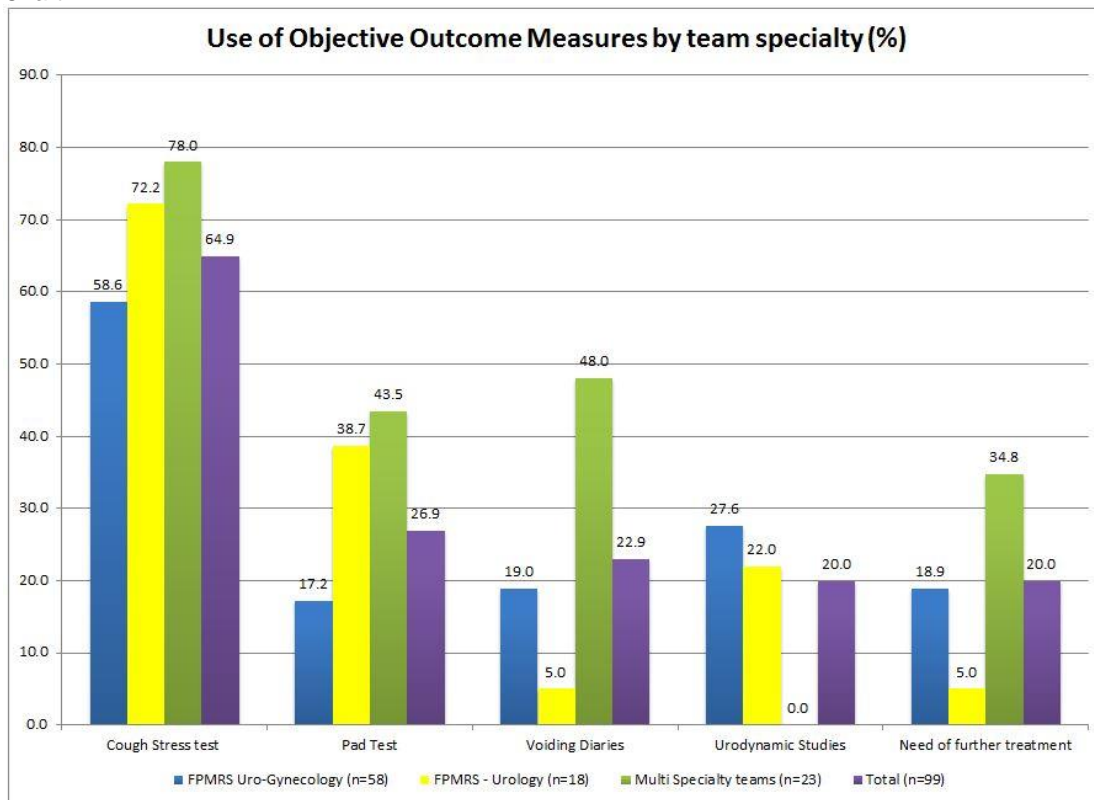


Chart 2



Interpretation of results

Despite a large array of validated questionnaires, our current literature lacks uniformity in outcome reporting after SUI procedures. This review indicates what researchers in the field used the most over the past 5 years. International differences were obvious: the KHQ is a popular instrument in the UK but not used in the US. Conversely, UDI and IIQ were used in the US and seldom in the UK. PGI-I and ICIQ-SF were also employed. Cough stress test and pad test were used as objective tools but their implementation was quite variable, with a 300 ml volume and a 1h test respectively being the most commonly reported. Study limitations included articles that were not reviewed when the selected mesh term was lacking, for abstracts only, and/or for non-English articles.

Concluding message

To unify the field of FPMRS and allow study comparisons, the most frequently used OMs could be chosen as a minimum core for future studies as they currently represent the preferred tools selected by the researchers in this field. The use of non-validated questionnaires should be discouraged.

Disclosures

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