

Urologic Surgical Associates of Delaware

Specializing in Robotic Surgery

Transvaginal Tape Female Sling and Transobturator Urethral Sling for Both Male and Female Incontinence, Perioperative Instructions

Overview

Stress incontinence is the unwanted loss of urine with coughing sneezing, getting up out of bed or a chair, or with other physical activities (sports). Stress incontinence reflects a weakness in the pelvic floor muscles responsible for lifting and closing the urethra (the urethral sphincter muscles.) This problem is very common in females, especially after childbirth or pelvic surgery. This problem is less common in males and in males a common cause is prostatectomy (removal of the prostate) surgery for prostate cancer or prostate enlargement. The most effective treatment for stress incontinence is urethral sling surgery.

Catheter Care

Under normal circumstances, you will go home the same day as surgery without a Foley catheter or tube placed in your bladder. After surgery, there is a small risk of not being able to empty your bladder. If this happens you may need a Foley catheter placed into the bladder. If this need does develop, it usually occurs within a few hours of surgery. You will be instructed to return to the office to have the catheter removed in 1-3 days.

Diet

You may return to your normal diet immediately. However, because the bladder surface or lining may be irritable as a result of the surgery, alcohol, spicy foods, caffeine, and cranberry drinks may cause some irritation or a sense of the need to void despite the fact that the catheter is emptying the bladder. Drink plenty of fluids during the day (8 - 10 glasses). The type of fluids (except alcohol) is not as important as the amount. Water is best, but juices, coffee, tea, soda are all acceptable.

Activity

Your physical activity is to be restricted, especially during the **first four weeks** at home. During this time use the following guidelines:

- a. No lifting heavy objects (anything greater than 10 lbs).
- b. No strenuous exercise, limit stair climbing to minimum.
- c. No sexual activity (females should wait one month to resume vaginal intercourse).

The sling in both males and females and the Transvaginal Tape in females is not anchored by anything other than your own body tissues. The sling works by pulling the urethra up into the pelvis where the pelvic floor muscles can better compress or close the urethra. Significant strain or activity can push the sling and urethra back down out of the pelvis and undo the surgery.

Bowels

For informational purposes only. Please consult your physician with any questions. USA Delaware 302-836-5500.

The rectum and the bladder are next to each other and any straining to pass a bowel movement can cause bleeding into the urine. A bowel movement every other day is reasonable. Use a mild laxative if needed and call if you are having problems. (Milk of Magnesia 2-3 tablespoons, or 2 Dulcolax tablets work well).

Vaginal Care (after Female Sling)

Remove the vaginal packing (for female sling but not transvaginal tape) from the surgery on the first day after surgery. The packing may be surprisingly long (like a handkerchief from a magician's sleeve!). The packing will normally appear quite bloody and after its removal there may be a bloody vaginal discharge for a few days. Vaginal yeast infections are common after these procedures. If you feel you are developing a vaginal yeast infection use an over the counter product such as a Monistat vaginal suppository. There is a small dressing over the obsturator puncture sites just outside the labia (for female sling but not transvaginal tape) and these dressings can come off in approximately 1-2 days after surgery. The small bandaids underneath can be removed in 7 days.

Incision Care After Male Sling

Urethral sling placement in the male is accomplished with a small incision between the scrotum and rectum and two small puncture sites on either side of the scrotum. These surgical sites will be covered with a small surgical dressing. This dressing can come off in approximately 1-2 days after surgery. The small bandaids underneath can be removed in 7 days.

Problems You Should Report to Our Office

- a. Fevers over 101.5 Fahrenheit degrees
- b. Heavy bleeding, or clots in the catheter or during voiding.
- c. Drug reactions (hives, rash, nausea, vomiting, and diarrhea).
- d. If the Foley catheter stops draining.

Follow up

You will need a follow-up appointment to check your surgical site in about two weeks. Call for this appointment at 302-836-5500.