The role of RGU for urinary incontinence after radical retropubic prostatectomy

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Incontinence after RRP

- One of the most devastating and feared complications.
- Just after catheter removal - 56%, Post op 3M - 21%, Post op 1yr - 14%
  - Davidson PJT Eur Urol 1996
- Stable recovery of continence: about 2 years
  - Coakley FV J Urol 2002
- Affecting factors
  - functional urethral length, surgical technique, age, early catheter removal.
Introduction-2

- Denervation of bladder neck d/t dissection, ligation of vessel occurred during RRP.
- Membranous urethra & external sphincter attribute continence after RRP.

Objective

◦ To explore probability of retrograde urethrogram to predict recovery of urinary continence.
Patients and Method-1

- **patients**: 28 patients who underwent RRP due to prostatic cancer
- **Exclusion**: neurogenic bladder 1 person, F/U loss 1 person.
- **Methods**: Compare duration of incontinence after RRP between group A and group B
  - group A - margin of membranous urethra: smooth, beaking appearance
  - group B - margin of membranous urethra: irregular
Patients and Method-2

- Pericatheter RGU: 3 weeks later postoperatively
  - if extravasation (-)
    → RGU without Foley catheter & voiding try.
  - if extravasation (+)
    → Re-try RGU 1 week later

- Follow up: Interview and voiding diary in OPD at 1, 3, 6, 9, and 12 months after Foley catheter removal.

- Definition of urinary function recovery: daily use of pad < 1
## Patient characteristics

<table>
<thead>
<tr>
<th></th>
<th>Group A (n=20)</th>
<th>Group B (n=6)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (yrs)</td>
<td>67.2±7.15</td>
<td>68.5±6.7</td>
<td>&gt;0.05</td>
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<tr>
<td>PSA (ng/ml)</td>
<td>12.0±8.6</td>
<td>9.5±3.9</td>
<td>&gt;0.05</td>
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<tr>
<td>Gleason score</td>
<td>7.3±1.1</td>
<td>7.33±1.0</td>
<td>&gt;0.05</td>
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<tr>
<td>Prostatic volume(gm)</td>
<td>33.1±18.0</td>
<td>22.3±3.3</td>
<td>&gt;0.05</td>
</tr>
</tbody>
</table>
Result

% Recovery of continence

F/U (Months)

Group A
Group B
Conclusions

- **Retrograde urethrogram**
  - Easy, simple method.
  - Confirms status of vesicourethral anastomosis.
  - may have role of predictive parameter of urinary function recovery.
  - On RGU, sufficient proximal urethral length, well preserved sphincter
    → expected early recovery of urinary continence.