

Extraurethral (non-circumferential) retropubic adjustable compression devices for stress urinary incontinence in women

Information for the public

Published: 22 March 2017

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What has NICE said?

There is not much good evidence about how well extraurethral (non-circumferential) retropubic adjustable compression devices for stress urinary incontinence in women work or how safe they are. They should only be used if extra care is taken to explain the risks and extra steps are put in place to record and review what happens.

More research on extraurethral (non-circumferential) retropubic adjustable compression devices for stress urinary incontinence in women is needed and NICE may look at them again if more evidence is published.

What does this mean for me?

Your health professional should fully explain what is involved in having this procedure, and discuss the possible benefits and risks with you. In particular, they should explain the uncertainty about the evidence on how likely it is to improve your symptoms and possible complications. You should also be told how to find more information about the procedure. You should only be asked if you want this procedure after having this discussion. Your health professional should ask you if details of your procedure can be collected.

The condition

Stress urinary incontinence is when urine leaks out at times when your bladder is under pressure, for example, when you cough or laugh, or during exercise. It usually happens because the muscles (such as the pelvic floor muscles) that stop urination are weakened or damaged. Treatment includes lifestyle changes such as weight loss and pelvic floor muscle training. If these don't work, surgery can be considered such as inserting special tapes (mesh) or slings, or colposuspension by open surgery.

NICE has looked at using [extraurethral \(non-circumferential\) retropubic adjustable compression devices](#) as another treatment option.

[NHS Choices](#) and NICE's [information for the public](#) about urinary incontinence in women may be a good place to find out more.

The procedure

Extraurethral (non-circumferential) retropubic adjustable compression devices aim to reduce the risk of urinary leakage in women with stress urinary incontinence. The procedure can be done with local, regional or general anaesthetic. It involves placing 2 small silicone balloons under the bladder, through a cut in the skin behind the vagina. The balloons are placed on either side of the urethra (the tube that carries urine from the bladder). The balloons are filled with fluid and they support the bladder, reducing leaks but allowing the normal passage of urine.

Each balloon is attached to a soft, plastic tube with a rubber disc (port) on the end. The port is implanted below the skin near the vaginal opening. After the procedure, fluid can be added or removed from the balloons through these ports to get the best effect for the individual person. The balloons are meant to be permanent.

Benefits and risks

When NICE looked at the evidence, it decided that there was not enough evidence to know how well extraurethral (non-circumferential) retropubic adjustable compression devices work. The 7 studies that NICE looked at involved about 600 women.

Generally, the studies showed the following benefits:

- less daily incontinence pad use for up to 6 years

- improvement in symptoms of stress urinary incontinence
- improved quality of life.

The studies showed that the risks included:

- erosion of the urethra, which is when the device wears through the urethra wall
- erosion of the port through the skin
- no improvement in symptoms or problems with the devices (including pain, the balloons moving out of place or not working correctly) that led to them being removed
- difficulty, urgency or pain when passing urine
- damage to the bladder or urethra during surgery
- urinary tract infections.

If you want to know more about the studies, see the [guidance](#). Ask your health professional to explain anything you don't understand.

Questions to ask your health professional

- What does the procedure involve?
- What are the benefits I might get?
- How good are my chances of getting those benefits? Could having the procedure make me feel worse?
- Are there alternative procedures?
- What are the risks of the procedure?
- Are the risks minor or serious? How likely are they to happen?
- What care will I need after the procedure?
- What happens if something goes wrong?
- How easy is it to remove the device if it does go wrong?
- What may happen if I don't have the procedure?

About this information

NICE [interventional procedures guidance](#) advises the NHS on the safety of a procedure and how well it works.

ISBN: 978-1-4731-2390-8

Accreditation

