

Autologous urethral sling no benefit after prostatectomy

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(HealthDay)—Placement of a retropubic urethral sling fashioned from

autologous vas deferens during robotic assisted radical prostatectomy does not improve recovery of continence, according to a study published in the February issue of *The Journal of Urology*.

Hao G. Nguyen, M.D., Ph.D., from the University of California-San Francisco, and colleagues conducted a phase 2 trial in which age-stratified patients were randomized to undergo robotic assisted radical prostatectomy by multiple surgeons with or without sling [placement](#) (95 and 100 patients, respectively). The outcomes were complete and near continence at six [months](#).

The researchers found that the proportions reporting complete continence were 66 and 65 percent for those without and with a sling, respectively, while 86 and 88 percent, respectively, reported near continence at six months after surgery; times to complete and near continence were similar between the groups. There was a correlation for younger age with higher likelihood of complete and near continence (odds ratios, 1.74 and 2.18 per decreasing five-year interval) after adjustment for clinical, urinary, and surgical factors.

"This trial failed to demonstrate a benefit of autologous urethral sling placement at robotic assisted [radical prostatectomy](#) on early return of continence at six months," the authors write. "Continence was related to patient age in adjusted models."

More information: [Full Text](#)

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