A technique for removal of intravesical tension-free tape and non-absorbable suture after anti-incontinence surgery

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Cite as: *Can Urol Assoc J* 2012;6(3):E115. <http://dx.doi.org/10.5489/cuaj.11289>

Intravesical tension-free vaginal tape and non-absorbable suture are uncommon, but important complications of anti-incontinence surgery. Since the foreign bodies could not be absorbed, they act as a nidus for stone formation and recurrent urinary tract infection. Today, optimal techniques for the removal of intravesical tension-free vaginal tape and non-absorbable suture have not yet been determined.¹ Therefore, the management of the foreign bodies still remain an operative challenge.² In recent years, Ho:YAG laser has been recommended for the removal of the intravesical foreign bodies.^{2,3} However, it is expensive and not available in most urologic centre. Herein, I would like to describing a simple technique to remove intravesical tension-free vaginal tape and non-absorbable sutures after anti-incontinence surgery.

A 26-Fr rigid nephroscope and nephroscopic scissors are used to remove foreign bodies. Under sedoanalgesia, a 26-Fr rigid nephroscope is placed in the bladder. For removal of tension-free vaginal tape, the nephroscope is advanced through the left upper tip of the tension-free vaginal tape. Then, the left upper tip of the tension-free vaginal tape is cut with nephroscopic scissors. The same procedure is performed on the right side. To remove the suture, the nephroscope is advanced through the upper tip of the suture. The upper tip of suture is then cut with nephroscopic scissors. The same procedure is carried out on the opposite side. At the end of the procedures, the suture and tension-free vaginal tape are removed with nephroscopic forceps. The procedures take about 5 to 10 minutes. No complications are observed, except mild hematuria during the procedure.

It is an outpatient procedure with minimal complication. The procedure time is minimal and the instruments are not technically difficult to maneuver by most urologists. The instruments are also available in every urological operating room. Additionally, fragmentation of stones associated with the foreign bodies can be achieved with a percutaneous rigid nephroscope and lithotripter. In contrast to the application of lasers, the procedure is cost-effective and practical. This technique is a good alternative to Ho:YAG laser for the removal of intravesical tension-free vaginal tape and non-absorbable suture after anti-incontinence surgery.

Competing interests: None declared.

This paper has been peer-reviewed.

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