

The Surgical Outcomes and Risk Factors for Failure of Mid-urethral Sling Surgeries in Elderly and Old Age Women with Urodynamic Stress Incontinence

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ABSTRACT

Objective: To study the surgical outcomes and risk factors for failure of three types of mid urethral slings in elderly and old age women with urodynamic stress incontinence (USI). **Materials and Methods:** Single incision sling (Solyx, MiniArc), trans-obturator tape (Monarc), retro-public mid-urethral sling (TVT) were performed amongst three category age groups of women (young <64yr, elderly 65-74yr and old >75yr) with USI. They were followed up for one year. **Results:** Postoperative data was available for 688 women. Overall objective cure rate was 88.2% and subjective cure rate was 85.9% at the end of one year follow up. Objective cure rates were 91.0%, 80.6%, 66.7% and subjective cure rates were 89.2%, 77.6%, 58.3% among young, elderly and old age women respectively. Both objective and subjective cure rates were significantly lower among old age group whilst only objective cure rates were significantly lower in elderly group compared to younger women. Urodynamically lower flow rate, higher post-void residual, smaller cystometric capacity and lower maximum urethral closure pressure were significant with old and elderly group. Urinary distress inventory-6 and incontinence impact questionnaire-7 improved significantly in all groups with significant changes from baseline only in older women. Intrinsic sphincter deficiency (ISD) was significantly associated with failure in older women. The operative time, perioperative complications, and length of hospital stay were no difference. **Conclusion:** MUS surgery is safe for the young and aging patients with USI and demonstrated significant improvement in its outcomes. Objective and subjective cure rates decrease with age and ISD was significantly associated with failure.

Anxiety, Depression and Marital Satisfaction in Women with Hyperemesis Gravidarum: A Comparative Cross-Sectional Study in Hospital Tengku Ampuan Rahimah, Klang, Malaysia

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ABSTRACT

Introduction: Hyperemesis Gravidarum (HG) is a severe form of vomiting that occurs among pregnant mothers. Due to the nature of HG, pregnant mothers may feel burdened by it and questions have been raised about the emergence of psychiatric illness during this period of vulnerability. **Objective:** To determine the association between anxiety, depression and marital satisfaction among patients with HG. **Methods:** Comparative cross-sectional study using Hospital Anxiety and Depression Scale, Mini International Neuropsychiatric Interview and ENRICH-EMS (Evaluation and Nurturing Relationship issues, Communication and Happiness – Marital Satisfaction Scale) were performed. **Results:** There were no differences in the prevalence rate of anxiety disorder among the patient with HG vs. comparative group (9% vs. 3%, $p>0.05$) and depressive disorder in women with HG vs. comparative group (16% vs. 8%, $p>0.05$). There were associations between HG and gravida, history of miscarriage and gestational diabetes ($p<0.05$). After adjustment, only history of gestational diabetes was associated with HG as a protective factor (AOR 0.034 95% CI 0.002-0.181; $p=0.0014$). We found that women with HG tended to score significantly higher than the comparison group for depressive symptoms in HADS-Depression subscale ($p=0.041$). **Conclusion:** Anxiety and depression are more common in women with HG and associated risk factors can be identified. We found no convincing association between HG and anxiety, depression and marital satisfaction, but women with HG significantly reported more depressive symptoms than women who were not diagnosed with HG. Psychiatric evaluation should be considered for women with HG.