

## Why Medanta - The Medicity?

Medanta - The Medicity has the rare combination of state-of-the-art technology along with compassionate staff to give the best possible care to the patients. Instead of increasing the count we believe in doing surgeries for right indications. Hence thorough preoperative workup is done to screen the patient before offering surgery. Moreover detailed postoperative care and counseling is also provided and instructions are given to avoid recurrence of this condition in future.

\* Problems related to urgency and urge incontinence are not relieved by this operation.



### Our locations

#### Medanta - The Medicity:

Sector - 38, Gurgaon, Haryana - 122 001  
Tel: +91 124 4141 414 Fax: +91 124 4834 111  
info@medanta.org

#### Medanta - Indore:

Plot No. 8, PU4, Scheme No. 54, Vijaynagar Square,  
AB Road, Indore, MP  
Tel: +91 731 4747 000 Fax: +91 731 4747 001

#### Medanta - Mediclinic:

E - 18, Defence Colony, New Delhi - 110 024  
Tel: +91 11 4411 4411 Fax: +91 11 2433 1433  
mediclinic@medanta.org

#### Medanta - Mediclinic Cybercity:

UG Floor, Building 10C, DLF Cyber City, Phase II,  
Gurgaon - 122 002 Tel: +91 124 4141 472  
mediclinic.cybercity@medanta.org

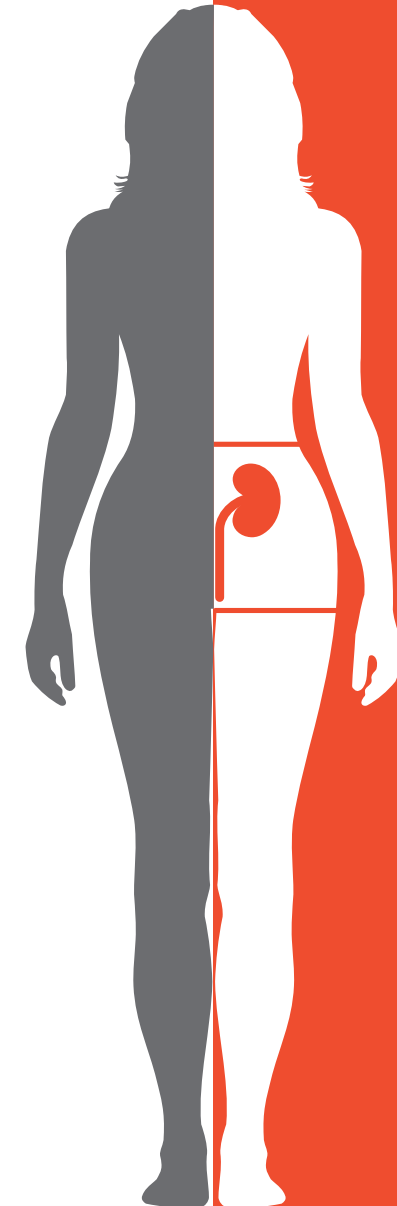
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## PATIENT INFORMATION

### SLING PROCEDURE



MEDANTA INSTITUTE OF  
KIDNEY & UROLOGY



## Introduction

Sling procedure is a method to treat stress urinary incontinence by placing a sling below the bladder pipe to restore its attachment with pelvic floor muscles.

## Why is it done?

In women with stress urinary incontinence, pelvic supports have been weakened by pregnancy, childbirth, trauma, radiation, prior surgery, muscle damage or hormonal changes causing the accidental loss of urine during coughing, sneezing, laughing or simple lifting etc. Due to loss of support, the bladder pipe is not able to remain in closed state during sudden added pressure over bladder. While Kegel exercises strengthen the pelvic floor muscles, Sling procedure restores the lost supports of bladder pipe and may offer the best solution of this problem.

## Alternatives

- Observation
- Pads
- Pelvic floor muscle exercises (Kegel exercises)
- Burch colposuspension
- Injection therapy (around the urethra) in selective cases

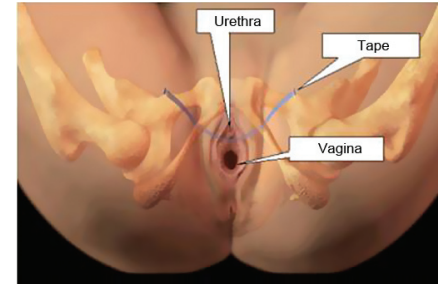
## Preparation of the procedure

Your surgeon will give you instructions regarding preparation for this procedure. These instructions will include guidelines on:

- Blood thinning medications: Any medicine that makes it hard for blood to clot must be stopped days/weeks prior to the procedure.
- Fasting: You may be required to fast for about 6-12 hours prior to the surgery.
- Investigations: may include routine and culture of urine and sometimes urodynamic study.

## During the procedure

This minimally invasive procedure mainly involves placement of the sling and typically lasts less than 20 minutes under local, regional or general anesthesia, depending on what you and your doctor choose.



During the procedure, a small incision (cut) is first made at front wall of birth canal. Then, a narrow strip of mesh is surgically placed in the body to hold the bladder pipe and give it a point of support. This self-fixating mesh anchors itself to tissue and muscle in the space surrounding the urethra.

## After the procedure

Your doctor may insert a catheter through your bladder pipe to drain urine from your bladder immediately after surgery. The catheter is usually removed before you leave the hospital.

If your bladder does not empty properly, you may have to use a catheter at home until normal bladder function resumes. Most women see results as soon as the catheter is removed, usually within a day or two after the procedure.

For approximately four to six weeks you should avoid sexual intercourse, heavy lifting and exercise. You can return to other normal daily activities at your doctor's discretion, often within one to two weeks.

## Benefits

A cure rate of around 93-94% has been reported in previous studies.

Your own tissue will grow into the pores of sling material with time and will add to the strength. Like cardiac stents this sling would be an integral part of your body lifelong.

## Risks

General risks of having a surgery:

- Bleeding
- Infection
- Injury to adjacent organs eg. Bladder and its pipe

Risks of having this procedure are:

- Urinary tract infection
- Urge incontinence\*
- Difficulty with urination
- Erosion of the synthetic material through your normal tissue
- Inflammation and irritation

## When to contact your doctor

You should contact your doctor immediately if you:

- Find it increasingly difficult to pass urine
- Develop symptoms of a urine infection (burning, frequency and urgency)
- Have fever
- Experience severe pain in the vagina
- Vaginal discharge of unusual odour
- Excessive vaginal bleeding