THE CHANGE FROM ABDOMINAL BURCH COLPOSUSPENSION PROCEDURE TO LAPAROSCOPIC BURCH COLPOSUSPENSION PROCEDURE

N. Pavia, S. Grixti, O. Tsar, M. Brincat, I. Knyazev, J. Mamo

Since the introduction of laparoscopy and laparoscopic simulation training in the Gynaecological department at Mater Dei Hospital Malta, the management of genuine stress incontinence has been drastically changed and improved. Laparoscopic Burch procedure started being performed in June 2013 and has become the preferred option in most patients.

Aim: To assess whether Laparoscopic Burch procedure has brought about an improvement in the management of patients with genuine stress incontinence compared with those undergoing the traditional abdominal Burch colposuspension procedure.

Method: Assessment of the number of abdominal Burch colposuspension and laparoscopic Burch colposuspension procedures performed respectively and comparison of length of surgery, number of complications, post-operative pain, length of hospital stay, and overall patient satisfaction.

Results: Since the introduction of Laparoscopic Burch procedure, it has been increasingly performed in preference to the open abdominal procedure. 42 open Burch colposuspensions were performed in 2011, 55 in 2012 and 5 in the first 8 months of 2013; whilst 5 laparoscopic Burch procedures have been performed since June 2013 to August 2013. There has also been a corresponding decrease in the length of surgery with increasing experience. Patient satisfaction is overall greater, with less post-operative pain and quicker return to daily routine. Complications have also been kept to a minimum and length of hospital stay has been decreased from a mean of 4-5 days to 1-2 days.

Conclusion: Laparoscopic Burch procedure has improved outcomes for the patient and may be less expensive for the hospital. Operating time is roughly similar for either surgery and the laparoscopic variant is by far preferred by both the patients and surgeons.