IS-85 The relationship between serum follicle-stimulating hormone and estradiol levels and urodynamic results in patients with pelvic floor dysfunction

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OBJECTIVE: This study was aimed to determine the relationship between serum follicle-stimulating hormone and estradiol levels and urodynamic results in patients with pelvic floor dysfunction. MATERIALS AND METHODS: Forty-four women were selected among patients who underwent urodynamic study for lower urinary tract symptoms and pelvic organ prolapse between April and October 2009. The basic characteristics and urodynamic results of the patients were evaluated. Serum estradiol (E2) and follicle-stimulating hormone (FSH) were measured by a chemiluminescence immunoassay (DxI 800; Beckman Coulter, CA, USA). Age-adjusted partial correlation analysis was performed among serum follicle-stimulating hormone and estradiol levels and urodynamic results. A value of P<0.05 was considered statistically significant. RESULTS: The means of the patient characteristics were as follows: age, 58.5 years; body mass index, 24.6 kg/m² and parity, 3.1. The menopausal rate of the patients was 68.2%. There was a significant negative correlation between serum estradiol level and time to peak flow in voiding pressure-flow study (P=0.03). There was no significant relationship between serum follicle-stimulating hormone level and any urodynamic results. CONCLUSION: The higher the level of serum estradiol, the shorter the time to peak flow in voiding pressure-flow study had the patient with pelvic floor dysfunction.

IS-86 Short-term outcome of management of severe cystocele with Perigee system

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Objective: The purpose of this study was to evaluate the outcome of Perigee system for the management of severe anterior vaginal wall prolapse in pelvic reconstructive surgery. Materials and Methods: Patients with POP-Q grade III/IV cystocele who underwent transvaginal pelvic reconstructive surgery with Perigee device between May 2006 and June 2008 were reviewed. The preoperative and postoperative clinical examination including the International Continence Society Pelvic Organ Prolapse Quantification system (ICS POP-Q) and multichannel urodynamic study. Results: A total of 77 women received the surgery with Perigee mesh, the mean age of the women was 64 years (range, 45-85 years) and mean parity was 3.9 (range, 0-8). Sixty-five of the 77 women had concomitant TVT-O procedure, including 29 women had USI, 36 women had occult USI. The mean follow-up duration was 15.64 months (range, 5-31) Four (5.56%) patients had vaginal bleeding after discharge, but this condition was well managed with conservative packing of vagina. Ten (13%) patients were noted to have mesh protrusion through the vagina, the protruded mesh was excised simply at OPD OR in 9 patients. Seventy-two (93.5%) patients were free of genital prolapse during the short-term follow-up. 2 patients had recurrent grade II uterine prolapse, 3 patients had recurrent grade II cystocele. Six (7.9%) patients had mild SUI after operation. There were no life-threatening complications. Conclusion: The short-term results of Perigee system seem encouraging. More than 90% patients were free of genital prolapse during the short-term follow-up. There were no life-threatening complications. However, the exact tolerance of vaginal mesh repair of the prolapse is an unknown issue. We remain careful on the extension of the indications of this technique.

IS-87 Change in bloodcoagulation, fibrinolysis and blood viscosity with aging, especially from viewpoint of gender

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[Objective] The incidence of thrombosis and ischemic heart diseases increases with age. We examined mature and elderly women as well as men by both rheologic and hemostatic examination. [Methods] With informed consent, 28 healthy mature women (under 35 years old), 17 climacteric women (44-55 years old), and 34 elderly women (65-85 years old) without complications were tested as well as age-matched men. Firstly, using a Micro Channel Flow Analyzer, whole blood passage was recorded in heparinized blood samples. Blood viscosity was also calculated by hematocrit. Secondly, as a screening test for hemostasis, 1) Fibrinogen, 2) Factor VIII, 3) von Willebrand Factors, 4) Factor X, 5) TAT and 6) PHC (Platelet-Hemostatic-Capacity) were tested. [Results] (1) Fibrinogen and von Willebrand Factor activity in men increased with age and was higher than in the age-matched women, in particular. Fibrinogen showed 383.6±26.4 mg/dl, but 331.6±21.8 mg/dl in women. (p<0.05) (2) Whole blood passage time in aged men was prolonged, at 71.6±19.8 sec while in the age-matched women, it showed 61.3±12.9 sec. (p<0.05) [Conclusion] The prolonged whole blood passage time seen in the aged men reflects the tendency for circulation to slow, as age-matched women. Moreover, Fibrinogen value was higher than that age-matched women. Aged men are slightly more thromboembolic than age-matched women, and this may contribute to longevity in women.