



UROLOGICAL SOCIETY OF AUSTRALIA AND NEW ZEALAND

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Urologists respond to Senate Inquiry findings into transvaginal mesh

The Urological Society of Australia and New Zealand is optimistic the findings of the *Senate Inquiry into the number of women in Australia who have had transvaginal mesh implants and related matters* will still allow women to have a full choice of options in the treatment of stress urinary incontinence.

Urologists treat women with stress incontinence, or urine leakage with activity, a condition that is common after childbirth. Nearly one in ten women will need surgery for stress incontinence by the time they reach 80. Incontinence is not normal and is associated with poor quality of life and greater care needs for ageing Australians.

The condition affects 5 million Australians, more than twice the number affected by asthma and anxiety, and costs the nation \$66.7 billion annually. Incontinence is both socially and emotionally debilitating, with strong links to depression.

The Senate Inquiry has recommended “transvaginal mesh be used as a last resort”.

“Whilst this is a fair and just recommendation in the case of mesh for pelvic organ prolapse, the Urological Society strongly believes that Australian women should be given the choice to have a mid urethral sling for treatment of their stress incontinence,” says Associate Professor Vincent Tse, Urological Society of Australia and New Zealand Female Urology Special Advisory Group Leader.

“The mid urethral sling is the most scientifically studied surgical procedure for stress incontinence in history and has substantially improved many thousands of women’s quality of life. Overwhelming clinical evidence shows that in the majority of cases patients have a durable, effective and safe outcome from sling surgery. There are other sound alternatives to the mid urethral sling but these have a higher morbidity and a longer recovery period, with the same potential risk of complications.

“Urologists recognise that some women have had significant, sometimes devastating adverse events in relation to the placement of mid urethral slings and we support the many recommendations the Inquiry has made in relation to safety, communication and ongoing monitoring,” says Associate Professor Tse.

The Urological Society welcomes the establishment of a device registry and invites Federal and State bodies to help resource such an initiative.

“The difficulties some women have experienced in relation to mid urethral sling placement has not always been a result of the technology alone and Urologists are experienced in managing such complications.

“Being able to offer the mid urethral sling as an option for women is important. The mid urethral sling has allowed many older women to have safe, successful treatment of their incontinence. Shared decision making between a woman and her surgeon remains paramount to the management of incontinence,” says Associate Professor Tse.

“Denying Australian women the option to choose a mid urethral sling from a number of operations offered by Urologists would be a retrograde step and out of keeping with best practice and recommendations by international professional bodies and jurisdictions.

“The mid urethral sling is still offered in the initial choice of surgeries in the NHS in the United Kingdom, many EU countries and the USA. We are extensively counselling women as to their choices,” says Associate Professor Tse.

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The Urological Society of Australia and New Zealand is the peak professional body for urological surgeons in Australia and New Zealand. Urologists are surgeons who treat men, women and children with problems involving the kidney, bladder, prostate and male reproductive organs. These conditions include cancer, stones, infection, incontinence, sexual dysfunction and pelvic floor problems.