An Initial Study to Evaluate the Efficacy and Benefits of Injection of Plasma Rich Platelets (PRP) during Vaginal Repair for Urinary Incontinence (And Anal Incontinence)

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Objective of the Study

The aim of this study was to evaluate the outcome of Plasma Rich Platelets injection for Urethral (and Anal) integrity support.

Methodology

Design

The investigation was designed as an observational study.

Setting

The investigation was undertaken at tertiary referral unit in K.S.A. (Saudi German Hospital, Aseer).

Population

The participants comprised of (52 women complaining of urinary incontinence (and 9 women complaining of anal incontinence) between Jan. 2018 to Aug.2019.

Methods

Preoperative evaluation of vaginal wall prolapse as usual.

Ant wall longitudinal incision, dissection of the vaginal wall from the urethra and bladder.

Identify the fascia, Kelly’s sutures 2 - 3 stitches.

Injection of PRP sub urethra at the level of mid-urethra to bladder neck (about 2 ml in each side.

Cut the excess vaginal wall tissue and suturing.

Regarding anal incontinence we inject PRP around the anus at the level of anal sphincter in 4 sites (at 3, 6, 9 and 12 ’o clock) one to one and half ml PRP in each site after posterior vaginal repair as usual.

Foley’s catheter was inserted.

Vaginal back was inserted to ensure hemostasis and postoperative analgesia was given mainly non-steroidal anti-inflammatory supp.

Main outcome

- Absence of Incontinence was evaluated objectively.
- Operative and postoperative complications were also assessed.
- Follow-up of the women after 2 and 12 weeks.

Results

The mean age of 52 years old for stress incontinence (33 years old for anal incontinence). All were evaluated for follow up in the clinic postoperatively after 2 and 12 weeks.

The procedure was successful in 50 cases of urinary incontinence out of 52 cases (but 7 out of 9 in Anal incontinence, but there was some improvement in in those 4 cases but not completely cured) with no infection, breakdown of the wound.

Conclusion

This procedure is both feasible and effective procedure for achieving good urethral (and Anal Integrity support) with disappearance of the Incontinence with almost no major complications. A prospective randomized clinical trial with long-term follow up and large number of cases is needed for further evaluation and compare the outcome.

Limitations of the Study

There are some of these limitations of this study and are given below:

- One of the limitations of this study was that it was based on the observational date, therefore does not provide any conclusive outcome or evidence. Also, the short term follow up of the results.

- To overcome this limitation, there is a need of carrying out randomized controlled trial for getting conclusive outcome and longer time for evaluation.

- The other limitation of this study was the sample size of the participants.

The sample size selected for this study was not appropriate to gain the conclusive and generalized outcome. Thus, there is a need of carrying out further evidence-based research studies along with the consideration of a large sample size so that the outcomes obtained for the research can be generalized.

Disclosure of Interest

There was No conflict of interest.
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Details of Ethical Approval

No ethical approval for the procedures as it was simple observational study.

Funding

No funding was taken from any person/organization.

Supporting Information

Some short videos and photos illustrating the surgical technique and the procedure.