

The MiniArc® Sling

What is a MiniArc sling?

The MiniArc sling is a micro invasive operation performed to correct stress urinary incontinence (SUI). It provides support to the mid-urethra, and has been shown to improve SUI in up to 92% cases. The MiniArc sling is performed with an improved technique that reduces the risk of bladder and vascular injury during surgery and leg pain postoperatively. The surgery has a shorter operative time compared to other conventional slings. The sling used in this operation is composed of polypropylene, which has been shown to be very well tolerated by the body. The major advantage of this sling is that you can return to your normal activities by the second post-operative day.

This procedure is to treat stress urinary incontinence. The MiniArc is not a cure for urgency although it may help with this symptom.



What is involved?

The procedure is performed under a short general anaesthetic, and takes about 10 minutes. Local or spinal anaesthesia may be used if required. During the procedure, a single small incision (1 - 1.5cm) will be made inside the vagina just under the urethra. The sling will be tunnelled into this incision and anchored to the obturator muscle. It does not have the exit points in the vulva compared to other conventional slings, thus further reducing the risk of vascular injury and leg pain.

What can go wrong?

There can be a small risk of bleeding (which is rarely severe enough to require blood transfusion), wound infection and injury to surrounding organs (eg. bladder). There is also a very small risk of sling rejection or infection, which may require sling removal. A small number of women (3%) may develop difficulty

passing urine following surgery, and this may require the use of a catheter temporarily. Some women can develop bladder overactivity, but this can be treated with pelvic muscle exercises and medication. Anaesthesia is not without risks - these are outlined in the anaesthetic consent forms.

What to Expect

Initial studies have shown the MiniArc to cure SUI in 90-92.3% of cases in the short term (follow up of up to 18 months). Since it is a micro-invasive surgery, it allows you to return to non strenuous activities shortly after the procedure. You may experience little or no pain. Weight loss if overweight, reducing or quitting smoking, and improving pelvic muscle tone by doing pelvic muscle exercises after surgery will ensure that the operation is a success.

Although the sling allows you to resume activities of daily living it is recommended then you do not lift heavy objects (more than 9lbs or 4kgs). If however, you are having a sling with vaginal repair, your doctor will advise you with regard to the level of activity permissible. You can have intercourse and return to work as soon as you feel able to. Please consult Professor Rane regarding returning to work following a vaginal repair.

After the Surgery

You will be seen in either the clinic or at urodynamics 6 to 12 weeks after the operation. If everything is well the success of your operation should be permanent.

5 days of antibiotics have to be taken to prevent infection. We strongly recommend taking anti-inflammatory medication (Nurofen) for 1 week, twice a day with food post operatively, unless you have a medical reason for not doing so or are already on anti-inflammatory medication.

You will have some vaginal discharge for 4 to 6 weeks. This should be light bleeding or spotting only, and this may vary during that period of time as healing occurs and your stitches dissolve.

You may experience for up to 72 hours:

- Urinary frequency
- Dysuria (burning and stinging sensation when you pass urine)
- Haematuria (blood stained urine)

Tips for Success

Remember to **rest**. If you are tired and uncomfortable you have been doing too much and need to slow down.

When emptying your bladder, sit on the toilet, feet flat and



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lean forwards.

Drink 6-8 glasses of fluid per day; limit your caffeinated drinks to 3 per day. Ensure your fibre intake is 30g per day.

If constipation is a problem, Lactulose, which you can buy from the chemist, or another stool softener should be used.

Contact your GP or Emergency Department if you experience any of the following:

- pain not relieved by painkillers
- burning or difficulty passing urine
- increased vaginal bleeding or passing clots
- smelly, offensive, or unusual genital discharge
- fever or feeling unwell

Your doctor will be happy to discuss any concerns that you may have regarding this operation.

I have read this information leaflet and understand its contents.

Signed: _____

Name: _____

Date: _____

PLEASE BRING THIS DOCUMENT WITH YOU AT THE TIME OF ADMISSION FOR YOUR OPERATION

*It is important to check with your insurance company, re driving your car as each company has different policies on driving and surgery.