Laparoscopic Retropubic Suspension

Your physician has recommended a procedure called retropubic suspension to help treat stress urinary incontinence (SUI). This surgery is done laparoscopically through small incisions in the abdomen. During the surgery, sutures are used to firmly support the pelvic organs and help prevent urine leakage.

You will be asked to do some things at home to prepare for surgery. Below are guidelines to help you prepare for your surgery.

**Weeks Before Surgery**
- Tell your doctor about aspirin and other medications, vitamins or herbs you take. Ask if you should stop taking them before surgery.
- Stop smoking to help reduce your risks during surgery.
- If you have been given any prescriptions to fill, do this before surgery.

**The Night Before Surgery**
- You may be asked to give yourself an enema. This cleans out your bowels for surgery. You will be provided with instructions.
- Do not eat, drink or chew anything after the midnight before surgery as instructed. This includes water and chewing gum. But if you’ve been told to take any medications, swallow them with small sips of water.

**The Day of Surgery**
Arrive at the hospital a few hours before surgery as directed. Have someone drive you there who can also stay during the surgery and drive you home. At the hospital, your temperature and blood pressure will be taken. In some cases, tests may be done. Then, you will receive one or more IV (intravenous) lines. These lines give you fluids and medications before, during and after surgery.

**About Anesthesia**
Before surgery, you’ll meet with the anesthesiologist or nurse anesthetist. He or she can tell you what kind of anesthesia you will receive and answer any questions you may have. General anesthesia allows you to sleep. Regional anesthesia numbs the lower part of your body. Local anesthesia numbs the area that will be operated on.
During the Procedure

- Small incisions are made in the abdomen.
- A laparoscope (a thin, telescope-like tool) is put into the abdomen through one of the incisions. This lets the surgeon look inside your body.
- The surgeon performs the surgery through the other small incisions. Sutures (stitches) are put through the tissue next to the vagina to help support the urethra and bladder firmly in place. This helps keep the urethra closed to prevent urine leakage.
- The incisions are closed with sutures, staples or strips of tape (Steri-Strips).
- Your surgery will take about two hours.

Risks and Complications

The risks and complications of this procedure may include:

- Infection
- Bleeding
- Risks of anesthesia
- Blood clots
- Damage to nerves, muscles, bladder or nearby pelvic structures
- Difficulty urinating
- Urinary urgency
- Mesh complications