Tension Free Vaginal Tape System (TVT)

Tension free vaginal tape (TVT or TFT) procedure is a surgery procedure to correct urinary stress incontinence (*involuntary leaking from the bladder*) in women. A 1/3-inch prolene mesh tape is used as a sling underneath the area where the bladder and urethra (*tube that drains the bladder*) connect. This restores the muscle and connective tissue (*fascia*) that have been stretched and damaged from having babies, or from chronic stress and straining. The operation takes less than an hour. It is an outpatient procedure (*you go home the same day*). It has an 80 to 90% success rate.

BEFORE THE PROCEDURE

- Do not eat or drink anything for 12 hours before the surgery.
- Do not take aspirin or blood thinners for one week before the surgery.
- Let your caregiver know if you develop a cold or an infection before the operation.
- If you are admitted on the day of surgery, arrive at the hospital an hour before the operation, to sign any necessary forms and to get prepared for the surgery.
- There is a waiting area available for family and friends during the surgery.
- Let your caregiver know if you think you may be pregnant.

LET YOUR CAREGIVER KNOW ABOUT:

- If you have any allergies, especially to medicines.
- All the medicines you are taking, including prescription drugs, over-the-counter drugs, herbal medicines, eye drops, and creams.
- Previous problems with anesthesia or Novocaine.
- History of blood clots or other bleeding problems.
- Previous surgery, especially bladder or vaginal surgery.
- Other health problems or medical diseases.

PROCEDURE

An intravenous (IV) will be placed in your arm, and a medicine will be given to relax you, but not put you to sleep. You will be given a local anesthetic in the area above the pubic bone and along the top of the vagina. Two very small incisions will be made just above the pubic bone. The lining (*mucosa*) at the top of the vagina will be opened and separated on each side of the urethra and bladder. A catheter is then placed in the bladder, for filling and drainage during the procedure. Then the prolene mesh tape is placed under the urethra, and the ends are passed up behind the pubic bone, just under the skin. After the mesh tape is properly placed, the catheter is removed. The patient is asked to cough, so that adjustments can be made to the tape, to make sure there is no leaking of urine before stitching (*suturing*) the mesh tape in place. The ends of the mesh tape are brought up, just under the skin, and sutured in place. The skin incisions are sutured closed. The vaginal lining is also stitched closed, and you are taken to the recovery room.

This operation should not be done if the woman is pregnant or plans to get pregnant, is on blood thinners (*anticoagulant treatment*), or has a urinary tract infection.

RISKS AND COMPLICATIONS

- Bleeding.
- Infection.
- Injury to surrounding organs and blood vessels.
- Problems with urination after the surgery.
- Failure of the operation to work as expected.
- Allergy to the mesh tape.
- Problems or allergies to the anesthetic.

AFTER THE PROCEDURE

You will go to a postoperative recovery area until your vital signs (blood pressure, pulse, breathing, and temperature) are stable. You may need to stay in the hospital a day or two, but most patients are sent home the day of the surgery. You may be sent home with pain pills or an antibiotic, if necessary.

HOME CARE INSTRUCTIONS

- Follow your caregiver's advice about diet, rest, driving, exercise, medicines, and follow-up appointments.
- You may take over-the-counter pain medicine, with your caregiver's recommendation.
- Do not take aspirin. It can cause bleeding.
- Do not lift over 5 pounds, until your caregiver says it is ok.
- Do not have sexual intercourse, until your caregiver says it is ok.
- Do not use tampons.
- You may take a laxative if needed, with your caregiver's recommendation.
- You may take sitz baths 2 to 3 times a day with your caregiver's advice.

SEEK MEDICAL CARE IF:

- There is increasing pain in the wound area.
- There is increased swelling and redness in the wound area.
- You develop a rash.
- You develop nausea, diarrhea, constipation or vomiting.
- You think the stitches in the wound are breaking up.
- You lose urine when you cough or sneeze.

SEEK IMMEDIATE MEDICAL CARE IF:

- You have an oral temperature above 102° F (38.9° C), not controlled by medicine.
- You begin to bleed from the wound area, above the pubic bone or vagina.
- You see pus coming from the incisions.
- You develop an abnormal vaginal discharge.
- You cannot urinate.
- You develop bloody or painful urination.
- You pass out.
- You develop chest or leg pain.
- You develop abdominal pain.

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