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Discharge Instructions for Trans-Obturator Tape

A mid-urethral sling or trans-obturator tape (TOT) surgery is a procedure performed to treat stress urinary incontinence. This is a condition in which urine leaks out on exertion, for example when you cough, sneeze, run or exercise.

The urethra is the tube from the bladder from which urine comes out. The urethra is normally surrounded and supported by muscles. These muscles keep a tight seal around the urethra, thus preventing leakage of urine. Women with stress urinary incontinence have weak muscles in this area. When these women cough, sneeze or exercise, the muscles are not strong enough to close the urethra. This allows urine to leak out.

TOT is an operation for incontinence. The surgeon places a ribbon-like strip of mesh under the urethra to give it support. This keeps the urethra closed during coughing, sneezing or physical activities. There is an incision made in the vagina as well as two small cuts in the groin. The mesh is well tolerated and remains in the body permanently. This procedure is usually done under general anesthetic (you are asleep), with a spinal anesthetic or under sedation.



Activities and ambulation: Rest on the day of surgery. The day after surgery, you should be able to return to normal activities (except for heavy lifting and exercise). You may climb stairs and go for walks. You can usually return to work within a week. Avoid heavy lifting (i.e. moving furniture, wet laundry, house cleaning, lifting young children) and/or exercise (e.g. cycling, jogging) for at least 4-6 weeks or until you see your surgeon.

Bathing: You may have a shower the day after surgery. Avoid soaking the surgical area until the cuts are healed.

Diet: You may eat and drink whatever you wish after surgery. Alcohol consumption in moderation is acceptable. Adjust your diet so that you avoid constipation. If you do become constipated, please ask your pharmacist for an over the counter medication (e.g. docusate sodium, Senokot, bisacodyl, milk of magnesium). It is very important to ensure that you are having regular bowel movements.

Pain: You may have some pain during the first week after surgery and mild discomfort for the first few weeks. The pain can seem more than expected as you will not have a big cut on your skin. You will have a prescription for pain medication or you may take an over-the-counter pain reliever such as Ibuprofen. Sometimes muscle aches occur in the inner thighs or low back for a few hours, sometimes lasting for several days. These usually settle with time and Tylenol. Note that medications for pain may cause constipation.

Sexual Activity: You should avoid sexual activity for 2-3 weeks and resume when you are comfortable doing so and when the vaginal stitches have fallen out or dissolved.

Urinary Catheter: You will be discharged home on the day of surgery with a urinary catheter. You will be taught how to empty and clean the catheter before you are discharged home. You will also be taught how to remove his catheter the morning after surgery at home.

Wounds: You will have 2 tiny cuts on either side in the groin crease. They will be closed using dissolvable stitches and will fall out on their own. You will also have a small incision in the vagina that is also closed using dissolvable stitches. Expect some light vaginal spotting for a few days after surgery. It may be pink, yellow or yellow-brown. If some pieces of suture (stitch) material come out, this is part of normal healing. Avoid use of tampons for 1 week after surgery.

Follow-up Appointment: My office will contact you with a follow-up appointment time and date.

When to Seek Medical Attention:

- Unable to pass urine for more than 4-6 hours in spite of drinking fluids
- Burning on urination, frequent or foul smelling urine, blood in the urine
- Chills or fever over 38 degrees C (101 degrees F)
- Severe pain that is not relieved by pain medication
- Persistent or heavy bleeding
- Persistent nausea and vomiting
- Wound redness, pus-like (yellow or green) drainage or foul smell from the incisions

For Urgent or Emergent situations, please call my office at 905-875-3920 during office hours (9:00am-5:00pm) or outside these hours, please go to your nearest Emergency Department.

*Updated Sept 2019