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HIGHLIGHTS:

Urinary incontinence, which affects approximately 11 million women in the United States, may be a symptom of a complex pelvic support disorder. While they may begin with childbirth, many women notice pelvic support disorders more as they age. A minimally invasive surgery called a sling procedure is one of many different procedures at Cedars-Sinai Medical Center to correct pelvic support disorders. It is being enthusiastically endorsed by women who often feel well the day after surgery and are able to quickly resume their active lifestyles.

SURGICAL TREATMENT FOR INCONTINENCE RESULTS IN QUICKER RECOVERY AND RESTORED QUALITY OF LIFE

LOS ANGELES (March 9, 2005) – About a year before her surgery, the symptoms of stress incontinence started to control Ellen Jay’s life (not her real name). She was constantly worrying that her bladder might empty again without warning and wore pads all the time to avoid embarrassment.

She tried special exercises to strengthen her pelvic muscles and several medications but nothing seemed to help. Then, Jay’s gynecologist referred her to the Center for Women’s Continence and Pelvic Health at Cedars-Sinai Medical Center. In October 2004 she underwent a minimally invasive surgery called a sling procedure that was performed by Cynthia D. Hall, M.D., a uro-gynecologist and co-director of the Center.

According to Hall, the sling procedure is the most popular surgery for women with stress incontinence. The surgeon places a strip of material under the urethra (the tube that drains urine from the bladder when you urinate) and suspends it under the pubic bone. The strip acts like a hammock, supporting and compressing the urethra to prevent urine from leaking during normal activity. Most patients are discharged the day of or the day after surgery and are urinating normally within a few days.

Hall believes many women would consider having a sling procedure if they knew how easy the recovery is. “Some women are hesitant to seek care for their urinary incontinence because they may have talked to other women who had the procedure done in the past when it was much more involved,” she says. “Although the approach then (vaginally) was similar, the slings of the past caused a lot of problems. Sometimes patients needed a catheter for as long as four weeks after surgery and were often sore because the procedure required a small abdominal incision.”

With the new, minimally invasive procedure, that is no longer the case, and Jay was pleasantly surprised at how easy both the surgery and recovery were. “I went home from the hospital the next day and felt absolutely fine,” recalls the 57 year-old retired pharmacist and mother of two children. “Every woman with this problem owes it to herself to have this surgery. I can’t begin to tell you what it has done for my life.”

According to Hall, stress incontinence is most common in young women. Older women, on the other hand,

(more)

have equal incidence of urge incontinence and mixed incontinence.

For some women with stress incontinence, Hall says, the golf course becomes problematic because they can't swing a club without leaking. To prevent wetting their clothes, they begin wearing pads all the time which can increase the risk of developing infections and irritations both inside and outside the vagina. Getting rid of the pads is a huge benefit of the surgery, Hall adds.

"Except for the tiny pinpoint holes that we make above the pubic bone to place the sling, the procedure is done totally vaginally with minimal dissection. It's a wonderful procedure. Patients are usually urinating normally either immediately or within a few days and they feel great ... they have their lives back," Hall says.

Cedar-Sinai's Center for Women's Continence and Pelvic Health provides comprehensive diagnostic and treatment services for women who suffer from various types of pelvic support disorders. In addition to urinary incontinence, other types of pelvic support disorders treated at the Center include pelvic organ prolapse, difficulty in bladder or bowel emptying and urinary frequency and urgency.

"The only drawback to the sling surgery, Jay recalls, is that you're told by your surgeon not to carry anything heavier than eight pounds for three months. . . Other than that, it was the best thing I ever did for myself."

For more information about the treatment of pelvic support disorders, contact Cedar-Sinai's Women's Center for Continence and Pelvic Health at 1-800-233-2771.

One of only four hospitals in California whose nurses have been honored with the prestigious Magnet designation, Cedars-Sinai Medical Center is one of the largest nonprofit academic medical centers in the Western United States. For 17 consecutive years, it has been named Los Angeles' most preferred hospital for all health needs in an independent survey of area residents. Cedars-Sinai is internationally renowned for its diagnostic and treatment capabilities and its broad spectrum of programs and services, as well as breakthroughs in biomedical research and superlative medical education. It ranks among the top 10 non-university hospitals in the nation for its research activities and was recently fully accredited by the Association for the Accreditation of Human Research Protection Programs, Inc. (AAHRPP). Additional information is available at www.cedars-sinai.edu.

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