TOT 8/4 - a way to standardize the TOT procedure
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Introduction
1. Several studies demonstrated that the placement of a TVT or TOT - even when done by the same surgeon - is randomly distributed under the urethra. A wide variation of distances between the TVT/TOT tapes and the urethra occurred also in our clinic.

The aim of our study was to develop a method by which the tapes could be placed beneath the urethra in defined distances.
The method should be simple and easy.

Patients
Patients who were suffering from urinary incontinence and who were candidates for a TOT were submitted to the study.
(see Ethical Approval!)

Operation

2. Two HEGAR pins were needed.
In our studies we decided HEGAR 8 in the urethra and HEGAR 4 beneath the urethra.

3. The TOT tape was placed inside.
(SIS Dynamesh, FEG, Jülich, Germany)

3. The HEGAR 8 pin was placed in the urethra.

4. and the HEGAR 4 pin was placed between the tape and the urethra.
Then the tapes were pulled tight. Thereafter the pins were removed and the skin closed by sutures.

Control
In all patients the placement of the TOT tapes were controlled by ultrasound examination.

Ethical approval
The Ethical Committee was astonished that this surgical method had been done so far without any standardization!

Results
The surgical technique was very simple. No specific side effects were observed.
Beside the senior author also every research fellow could reproduce the distance by placing the tape on her/his own.
All tapes were placed between 3.2 and 3.9 mm beneath the urethra.  

Discussion
Our Ethical Committee could not believe that the TVT or TOT procedures were done without any standardization of the surgical procedure where to place the tape under the urethra!
Our technique is easy to perform and offers the possibility to teach the technique to young surgeons easily.
By choosing the distance between tape and urethra everybody can define her/his interpretation of „tension-free“!
We will now compare the effectiveness between TOT 6/3 and TOT 8/4.