



WOMEN'S PELVIC HEALTH INSTITUTE

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Mesh Use for Stress Urinary Incontinence

On July 13, 2011, the FDA issued a safety communication and update, intending to inform patients and health care providers that "serious complications associated with surgical mesh for transvaginal repair of pelvic organ prolapse are not rare." This statement has been taken out of context by law firms leading to misinformation being disseminated to the public. The concerns that resulted is appreciated given the rash of advertisements by various law firms.

For clarification, the recent safety communication was meant specifically for Transvaginally placed mesh for Pelvic Organ Prolapse repair and **excludes** mesh used for stress urinary incontinence surgery as well as mesh placed abdominally for pelvic organ prolapse. The recent FDA notification specifically states that mesh used for stress urinary incontinence (SUI) and mesh placed abdominally for prolapse surgery is clearly supported by long-term evidence and is considered standard of care.

The American Urogynecologic Society (AUGS) statement regarding this matter is attached below as a link for your review. I have copied an excerpt from section IV regarding Urinary incontinence which summarizes and hopefully answers your questions regarding your surgery.

... "Midurethral slings using synthetic mesh, placed via either a retropubic or transobturator approach, represent the current standard of care for the surgical treatment of SUI. With no FDA-approved drugs available, surgery is an important and effective treatment for SUI in women. With over 15 years' experience in the U.S. and over 40 randomized clinical trials supporting the use of mesh for SUI surgery substantial evidence supports the safety and efficacy of the use of synthetic mesh slings for SUI."

Additional information can be obtained through the American Urogynecologic Society's patient resources website at:

<http://www.voicesforpfd.org/p/cm/ld/fid=90>

<http://www.voicesforpfd.org/p/cm/ld/fid=87>

<http://www.augs.org/d/do/168>

Please feel free to contact us for further clarification or if you have any additional questions or concerns.

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