

稿件編號：OU01	<p>聚丙烯篩網的免疫化學分析：網片尺寸是否有所不同？ Immunochemical analysis on polypropylene mesh: does mesh size make a difference?</p> <p>張藍心¹ 盧佳序¹ 林益豪¹ 朱筱倩² 謝武橋¹ 陳怡斌³ 林口長庚紀念醫院婦產部¹ 長庚大學² 基隆長庚紀念醫院婦產部³</p>
臨時稿件編號：0274	
論文發表方式：口頭報告	<p>Objectives: The aim of the study is to demonstrate the impact of the size of the implanted mesh relation to its immunochemical reaction implanted into animal models.</p>
論文歸類：婦女泌尿	<p>Methods: An experimental study utilizing 54 female Sprague Dawley(SD) rats divided into 5 groups: Control, Sham, and Study groups [Mesh-Small (M-S), Mesh-Medium (M-M), Mesh-Large (M-L)]. The M-S group uses a mesh size of 0.2x0.2cm, M-M a mesh size of 0.5x0.5cm, and M-L a 0.7x1.0cm mesh size. The sham group underwent vaginal dissection with no mesh implantation. The rats were sacrificed using isoflurane overdose on Day 7 and Day 30. The mesh with the surrounding vaginal and bladder wall tissues were removed and processed for histochemical and western blot analysis.</p> <p>Results: There is a significant increase to IL-1 and TNF- immunoreactivity with Day7 M-M and M-L groups when compared against the Sham with p values of 0.001 and <0.001 respectively. M-L showed significantly higher immunoreactivity to TNF-□ persisting to Day 30. All study groups presented a significantly higher immunoreactivity to MMP-2 and NGF on Day 7. However, reactivity to NGF does not persist to Day 30 in all groups. Immunoreactivity to CD 31 on Days 7 and 30 appear significantly greater on M-M and M-L groups, with M-L reaction continuing to Day 30.</p> <p>Conclusion: Mesh size is directly proportional to the inflammatory reaction in the host tissue. The prolonged inflammatory process leads to delayed tissue remodeling and angiogenesis, which could delay mesh-tissue integration.</p> <p>Keywords: Immunochemical analysis; Inflammation; Polypropylene Mesh; Transvaginal mesh</p>

稿件編號：OU03	<p>患有骨盆底疾病之婦女的陰道排氣的盛行率及其對於性功能之影響</p>
臨時稿件編號：0346	<p>The prevalence of vaginal flatus in women with pelvic floor disorders and its impact on sexual function</p> <p>劉蕙瑄¹ 蘇聰賢¹ 黃俊淇² 謝耀德² 新竹馬偕紀念醫院婦產部¹ 台北馬偕紀念醫院婦產部²</p>
論文發表方式：口頭報告	<p>Background: Vaginal flatus is involuntarily passing gas from the vagina. Women seldom voluntarily report it, and related data are limited.</p>
論文歸類：婦女泌尿	<p>Aim: To investigate the prevalence of vaginal flatus in women with pelvic floor disorders and its impact on sexual function.</p> <p>Methods: This was an observational study involving women who visited a urogynecologic clinic in a tertiary medical center. Patients were asked about their experience of vaginal flatus. Other evaluations included urodynamics, genital prolapse stage, and quality of life questionnaires, including the short form of the Pelvic Organ Prolapse/Urinary Incontinence Sexual Questionnaire (PISQ-12), Urogenital Distress Inventory (UDI-6), and Incontinence Impact Questionnaire (IIQ-7).</p> <p>Outcomes: Clinical characteristics, vaginal anatomical landmarks, stage of prolapse, urodynamic parameters, and quality of life scores were compared between women with and without vaginal flatus.</p> <p>Results: Among 341 women, 118 (35%) reported vaginal flatus, which was more common in those who were younger (a mean age of 49.3±9.2 years; range, 25–74 years vs. 49.3±9.2 years; range, 25–74 years, p<0.001) and sexually active (98% vs. 55%, p<0.001). Women with vaginal flatus had significantly worse sexual function (PISQ-12, 16.3±15.9 vs. 30.9±8.0, p<0.001), and incontinence-related quality of life (UDI-6, 23.4±10.5 vs. 17.8±8.9, p=0.039; IIQ-7, 25.5±14.5 vs. 17.2±12.5, p=0.012). For frequency and bother, 46% (48/116) of the women reported often or always having symptoms during sexual activity, 15% (5/34) when performing daily activities, and 12% (4/31) when exercising; and 60% (70/116) felt least moderate bothersome during sexual activity compared to 5% (2/34) when performing daily activities and 18% (6/31) when exercising.</p> <p>Clinical Implications: Vaginal flatus is prevalent in women with pelvic floor disorders, particularly in those who are younger and sexually active.</p> <p>Strengths & Limitations: The strength of this study is to evaluate the sexual function with validated questionnaires. The lack of data after pelvic floor management is the major limitation.</p> <p>Conclusions: Vaginal flatus has a significantly negative impact on sexual function in women with pelvic floor disorders, routine counseling should be considered for these patients.</p>

稿件編號：OU05	接受小陰唇手術之性功能影響 The impact on sexual function after labia minora reduction
臨時稿件編號： 0299	林冠伶 ¹ 盧紫曦 ¹ 劉奕吟 ² 龍震宇 ³ 高雄大同醫院婦產科 ¹ 高雄小港醫院婦產科 ² 高雄醫學大學附設醫院婦產部 ³
論文發表方式： 口頭報告	Background: Hypertrophy of labia minora can result to discomfort and even impair life quality. There is a trend of surgical correction of labia minora. However, the evaluation of sexual function after vulvoplasty is less discussed. We review our patients if there were any differences in sexual function and assess our results after the surgery.
論文歸類： 婦女泌尿	Methods: We conducted a retrospective chart review of all cases of primary or secondary labia minora reduction surgery performed by two surgeons from January 2017 to October 2018. We recorded patient demographics, the associated vulva symptoms with VAS scores, the impact on quality of life, and sexual function with Female Sexual Function Index (FSFI) and complications. Results: We included 75 labia minora reduction procedures. Among the patients, 75.5% are sexually active, and 73.3% are nulliparous. A wedge excision was performed in most cases. The associated symptoms of itching, traction pain, irritation, malodors discharge and general discomfort significantly improved after surgical reduction($p<0.05$). The surgical outcome was rated very good or excellent by 95% of patients. Women with sexual life have greater satisfaction with significant pain improvement from postoperative FSFI questionnaire($p=0.038$). The complication occurred in 3% of cases, usually owing to postoperative pain, hematoma and bleeding. Conclusions: Labiaplasty seems safe and shows high rates of overall satisfaction. Otherwise, sexual pain also significantly improved postoperatively.

稿件編號：OU07	<p>Oxytocin 凝膠在停經後陰道上皮萎縮女性的使用 Topical oxytocin gel for postmenopausal vaginal atrophy</p>
臨時稿件編號： 0277	<p>王語瑄¹ 劉蕙瑄¹ 黃文助¹ 蘇聰賢² 台北馬偕紀念醫院婦產部¹ 新竹馬偕紀念醫院婦產部²</p>
論文發表方式： 口頭報告	<p>Around 90% of postmenopausal women are suffering from vaginal atrophy due to reduced circulating estrogen concentrations. There are various options of hormone replacement therapy including systemic and topical hormone. However, patients who mind using hormone therapy or those who have estrogen-dependent types of cancer are contraindicated by hormone replacement therapy rather systemic or topical hormone.</p>
論文歸類： 婦女泌尿	<p>This study reviewed and analyzed all the randomized control trials of using topical oxytocin gel on vaginal atrophy in recent ten years. The tools for evaluation include histopathological analysis and vaginal maturation index according to vaginal biopsy, vaginal PH, sexual function and patients' subjective symptoms score of vaginal atrophy. The results of this study showed oxytocin gel could potentially be used for symptomatic relief and to promote restoration of the vaginal epithelium in postmenopausal women who suffer from vaginal atrophy, without causing any side-effects and without causing any significant changes in systemic hormone levels. Further details will be revealed in the following presentation.</p>

稿件編號：OU08	以 Sankey 圖示方式探討 2011~2020 年間發表於 Pubmed 醫學資料庫婦女泌尿領域最具影響力的國家及學者
臨時稿件編號：0291	<p>The most influential authors published in Pubmed central in urogynecology-related field 2011~2020, by using Sankey diagram</p> <p>吳銘斌¹ 錢才瑋² 奇美醫學中心婦女泌尿科¹ 奇美醫學中心醫學研究部²</p>
論文發表方式：口頭報告	Background: Article publications and citations are frequently used for assessing author academic achievements (AACs), but some problems were encountered in academics due to (1) author contributions are not equal on the article bylines and (2) h-index with integer values harder to discriminate AACs in a group or discipline.
論文歸類：婦女泌尿	<p>Objective: The study aimed to (1) present the x-index using author-weighted scheme to demonstrate authors who worked in urogynecology-related department worldwide, and display AACs on visual representations of Kano and Sankey diagram.</p> <p>Methods: We downloaded article abstracts in Pubmed Central after searching keywords of urogynecology-related affiliations 2011~2020. A total of 1,419 abstracts were collected and 4,906 citations were matched to their corresponding articles. The x-index was used to evaluate the AACs for authors and author affiliated countries using author-weighted scheme to adjust the contributions to articles. Social network analysis (SNA) was applied to investigate the association of entities in a network, Three visual representations of Sankey diagram, choropleth map, and Kano diagram were used to display the study results.</p> <p>Results: We observed the followings: (1) The most number of publications was found in the United States (837, 59%), followed by Taiwan (7%) and Brazil (5%). The highest AAC based on x-index was from the US (23.52), followed by Brazil (22.12) and Taiwan (7.64). Three attributes for entities (e.g., countries, institutes, authors, and MeSh terms) are easily discriminated using the Kano diagram. The Sankey diagram helps up present all influential entities in a picture that implemented Kano diagram to exhibit the association between entities.</p> <p>Conclude: We demonstrated the x-index based on the author-weighted scheme (AWS) to compare AACs for authors who worked in urogynecology field around the world. Our study not only provided a fair evaluation approach in AAC assessment, but also interpreted the characteristics of AACs for entities on dashboards that are promising and innovative in bibliographic analyses and worth mimicking the visualizations in the future, not just limited to the urogynecology discipline as we did in this study. .</p>

稿件編號：OU09	<p>玻尿酸膀胱灌注治療前後間質性膀胱炎的婦女之尿動力學檢查結果與臨床症狀預後的比較</p>
臨時稿件編號：0009	<p>Effect of intravesical hyaluronic acid treatment on urodynamic and clinical outcomes among women with interstitial cystitis/painful bladder syndrome</p> <p>梁景忠¹ 彭榆真² 馮敏² 張藍心² 林益豪¹ 邱月暇³ 長庚紀念醫院林口總院;長庚大學醫學系¹ 長庚紀念醫院林口總院² 長庚大學醫務管理學系³</p>
論文發表方式：口頭報告	<p>Purpose: Treatment of interstitial cystitis/bladder pain syndrome (IC/BPS) is often delayed because of a lack of objective data during diagnosis. This study was conducted to determine the clinical validity of using urodynamic studies to investigate the effect of intravesical hyaluronic acid (HA) treatment among women with IC/BPS.</p>
論文歸類：婦女泌尿	<p>Materials and Methods: Thirty patients with IC/BPS undergoing 6-month intravesical instillation of HA were recruited. Pretreatment evaluation involved a urinalysis and urinary culture, urinary cytology, a 3-day voiding diary, and cystoscopy with hydrodistention of the bladder. Urodynamic study was performed before and after HA treatment. Symptomatic changes were assessed using a questionnaire covering lower urinary tract symptoms, the O'Leary-Sant symptom index and problem indexes (ICSI and ICPI), and the visual analog scale for pain and urgency. Patient demographics, urinary symptoms, ICSI/ICPI scores, pain and urgency scores, and urodynamic results before and after HA treatment were compared.</p> <p>Results: Urinary frequency, nocturia, urgency, pelvic pain, bladder capacity, ICSI, and ICPI were significantly improved after HA treatment. Comparing urodynamic parameters, the volumes at first desire to void (FDV) and maximum cystometric capacity were significantly increased after HA treatment. Before HA treatment, a negative correlation existed between the ICSI and ICPI and urodynamic parameters, including maximum flow rate and bladder capacity, but there were no significant correlations after treatment. Before HA treatment, a negative correlation was discovered between nocturia and FDV. However, after HA treatment, there were no significant correlations between urinary symptoms and urodynamic parameters.</p> <p>Conclusions: Our results indicate that the improvement of urinary symptoms of IC/BPS after HA treatment is associated with increased FDV and maximum cystometric capacity. The value of FDV and the frequency of nocturia after treatment may become useful objective indicators for prognosis of IC/BPS.</p>

稿件編號：OU10	<p>經陰道網膜手術後新發應力性尿失禁的超音波預測因子 Ultrasound predictor of postoperative de novo stress urinary incontinence following transvaginal mesh surgery</p> <p>龍震宇¹ 劉奕吟² 盧紫曦³ 林冠伶³ 葉建麟¹ 高雄醫學大學附設醫院婦產部¹ 高雄市立小港醫院婦產科² 高雄市立大同醫院婦產科³</p>
臨時稿件編號： 0348	
論文發表方式： 口頭報告	Purpose: The aim of our study was to evaluate the ultrasound predictor of postoperative de novo SUI in POP women after surgery.
論文歸類： 婦女泌尿	<p>Materials and Methods: Women with POP stage II or greater defined by the POP quantification (POP-Q) staging system without SUI, were referred for transvaginal mesh (TVM) surgery at our hospitals. We excluded the patient who underwent concomitant anti-incontinence surgery during operation. Clinical evaluations before and after surgery included perineal sonography to measure posterior urethrovesical (PUV) angles at rest and straining status, pelvic examination, multichannel urodynamic study, and a personal interview to evaluate the lower urinary tract symptoms.</p> <p>Results: Clinical backgrounds are not significant in both groups. The mean PUV angles at rest and straining revealed not significantly different in women with and without SUI after TVM.</p> <p>Conclusions: Ultrasound assessment appears to provide limited information in predicting post-operative de novo SUI for continent women undergoing TVM for the treatment of POP.</p>

稿件編號：OU11	<p>使用低能量體外震波治療在間質性膀胱炎患者:長庚醫院 30 例研究</p>
臨時稿件編號： 0350	<p>Use of low-intensity extracorporeal shock wave therapy in the management of interstitial cystitis/bladder pain syndrome patients: A thirty case study in Chang-Gung Memorial Hospital.</p> <p>林益豪¹張藍心¹謝武橋¹盧佳序¹梁景忠¹ 林口長庚醫院¹</p>
論文發表方式： 口頭報告	<p>Background: To investigate the outcomes of low-intensity extracorporeal shock wave therapy (Li-ESWT) on interstitial cystitis/bladder pain syndrome (IC/BPS) patients.</p>
論文歸類： 婦女泌尿	<p>Methods: A prospective study was carried out in Oct. to Dec., 2020. The study included 30 women suffering from bladder pain syndrome for at least 6 months. Patients were treated with suprapubically applied Li-ESWT (3000 pulses once a week for 8 consecutive weeks). The device used was a standard electromagnetic shock wave unit with a focused shock wave handpiece. The degree of pain was evaluated with help of Visual Analog Scale (VAS, rated 0 - 10) before and after treatment. Questionnaires (included OLEARY-SANT-symptoms, OABSS, ICIQ-SF, PISQ-12) were performed. Follow-up examinations took place 0, 4, 8 and 12 weeks after application of ESWT. Ethical approval and written consent were obtained.</p> <p>Results: Thirty women completed the study. In OLEARY-SANT-symptoms, OABSS, and ICIQ-SF, significant differences were observed between the results before application of Li-ESTW and all follow-up results ($p < 0.05$) respectively.</p> <p>Conclusions: Li-ESWT seems to significantly decrease pain perception and nocturia in the treated women. The method described is simply reproducible, inexpensive and without demonstrable side effects.</p>

稿件編號：OU12	<p>單一電波治療於女性應力性尿失禁及性功能的臨床治療效果</p> <p>The Clinical Effects of Single-Treatment Radiofrequency Therapy on Female Stress Urinary Incontinence and Sexual Function</p>
臨時稿件編號：0206	<p>盧紫曦¹ 林冠伶¹ 劉奕吟² 陳容仟³ 吳宜霖³ 蘇玲惠³ 林亞玲³ 龍震宇³ 高雄市立大同醫院婦產科¹ 高雄市立小港醫院婦產科² 高雄醫學大學附設中和醫院紀念醫院婦產部³</p>
論文發表方式：口頭報告	<p>Objective: To evaluate the treatment efficacy of Single-Treatment Radiofrequency Therapy on female stress urinary incontinence and sexual function.</p>
論文歸類：婦女泌尿	<p>Material and Methods: Thirty -nine women with clinical symptoms of stress urinary incontinence were scheduled for Single-Treatment Radiofrequency Therapy from March 2019 through April 2020. All subjects underwent multichannel urodynamic studies, perineometry, one hour pad test, three -day bladder voiding diary and questionnaire assessments by using VLQ , UDI-6, IIQ-7, ICI-Q, FSFI prior to and 3 months after Radiofrequency Therapy ,with follow-up durations of 3 months.</p> <p>Results Among these 39 patients, there was a significant improvement in pad test amount and Detrusor muscle at peak flow from urodynamic studies after 3-month radiofrequency therapy. Symptomatic improvement in genitourinary symptoms with total reduction in VLQ, OABSS, UDI-6, IIQ-7, ICIQ-SF score were found post treatment (P<0.05). The scores of all parameters of FSFI except the lubrication and pain domain, improved significantly after radiofrequency therapy (P<0.05). Changes in scores of voiding bladder diary before and after treatment of Radiofrequency Therapy with significant reduction in mean micturition time, daily fluid intake, daily urine output and mean urgency time.</p> <p>Conclusion: Single-Treatment Radiofrequency Therapy emerges as a non-invasive alternative treatment in female stress urinary incontinence with significant improvement in clinical symptoms and sexual function.</p> <p>Word Count: 205</p>

稿件編號：OU13	<p style="text-align: center;">陰道二氧化碳雷射治療應力性尿失禁的成效</p> <p style="text-align: center;">The effect of Vaginal Pixel CO2 Laser treatment on stress urinary incontinence</p>
臨時稿件編號： 0172	<p>葉建麟¹ 林冠伶² 劉奕吟³ 盧紫曦² 龍震宇¹ 高雄醫學大學附設醫院¹ 高雄市立大同醫院² 高雄市立小港醫院³</p>
論文發表方式： 口頭報告	<p>Purpose. The aim of our study is to assess efficacy of noninvasive CO2 laser (Pixel CO2 laser) for female stress urinary incontinence (SUI).</p>
論文歸類： 婦女泌尿	<p>Materials and Methods. Twenty women with SUI were included in the study and scheduled for one single vaginal CO2 laser treatment. The procedure was performed with a Pixel CO2 laser (by ALMA Laser, Israel). All subjects had a baseline and post-treatment assessment that included urodynamic studies and lower urinary tract symptoms.</p> <p>Results. Significant improvements in SUI were found 1 month after Er:YAG laser treatment when compared to the baseline results ($p < 0.05$). The battery of questionnaires administered to patients, including the OABSS, UDI-6, and IIQ-7, all showed significant improvement following therapy ($P < 0.05$). The treatment efficacy (cured plus improved) for vaginal CO2 laser for SUI at 1-month follow-up was 90 % (18/20). No permanent or severe adverse events were found.</p> <p>Conclusions. The short-term results showed vaginal Pixel CO2 laser is a safe and efficacious treatment for women with mild to moderate SUI.</p>

稿件編號：OU14	台灣地區各種型態之「憂鬱症」與「間質性膀胱炎」之因果關係 The Causal Effect of Different Depression Subtype on Interstitial Cystitis/Painful Bladder Syndrome
臨時稿件編號： 0092	
論文發表方式： 口頭報告	The Causal Effect of Different Depression Subtype on Interstitial Cystitis/Painful Bladder Syndrome
論文歸類： 婦女泌尿	

稿件編號：OU15	Chiari 畸形女性接受骨盆底重建手術併陰道無張力吊帶手術術後持續尿液滯留 Persistent urine retention after POP surgery combined with TVT-O in a type I patient
臨時稿件編號： 0283	with Chiari malformation 黃閔暄 ^{1,2} 龍震宇 ² 關龍錦 ¹ 郭宗正 ¹ 郭綜合醫院婦產部 ¹ 高雄醫學大學附設中和紀念醫院婦產部 ²
論文發表方式： 口頭報告	Introduction Chiari malformation refers to a condition in which a part of the brain (the cerebellum) at the back of the skull bulges through a normal opening in the skull where it joins the spinal canal. Such malformations are associated with the formation of a syrinx—a fluid-filled cyst—in the spinal cord, also known as syringomyelia. Syringomyelia can cause loss of bladder control, and as therefore might lead to micturitional disturbance.
論文歸類： 婦女泌尿	Case Report A 64-year-old woman had the underlying disease of Chiari malformation type I with syringomyelia. She had suffered from a protruding vaginal mass for 10 years and her symptoms had progressed. Associated symptoms were incomplete bladder emptying, voiding difficulty, hesitancy, stress urinary incontinence, frequency, nocturia, and urine urgency. Pelvic examination showed pelvic organ prolapse stage 4. Urodynamic testing revealed bladder outlet obstruction and urodynamic stress incontinence. Under the impression of pelvic organ prolapse stage 4 with urodynamic stress incontinence, she was admitted for transvaginal pelvic reconstruction with uphold mesh and tension-free vaginal tape-obturator. However, acute urine retention was found after the operation. Big and floppy bladder was noted, so intermittent catheterization and extracorporeal shock wave therapy were also given. After the extracorporeal shock wave therapy course was completed, sonography estimated residual urine after self-voiding of around 150 ml. Lower urinary tract symptoms all improved; consequently, the patient continued with follow-up at our clinics. Conclusion Patients with syringomyelia should be evaluated before operations of stress urinary incontinence or pelvic organ prolapse are performed, due to the potential for complicated micturitional disturbance. Moreover, patients would need more time and effort to recover from such an operation. Illustration of the possibility of additional post-operation treatment is extremely important.