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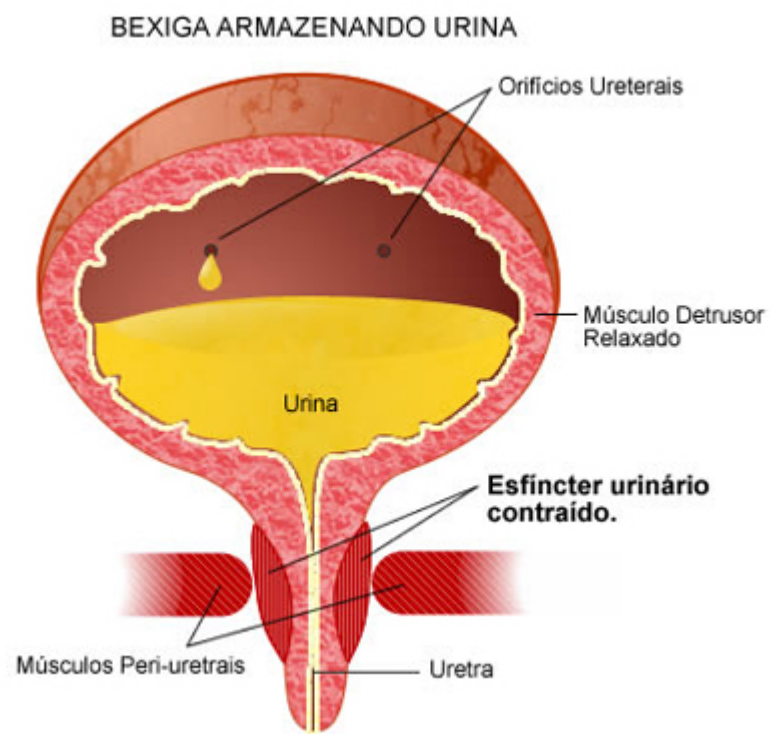
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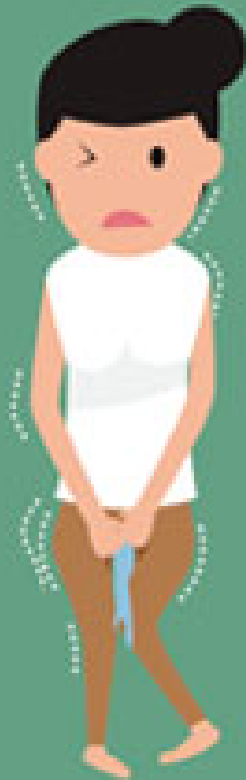
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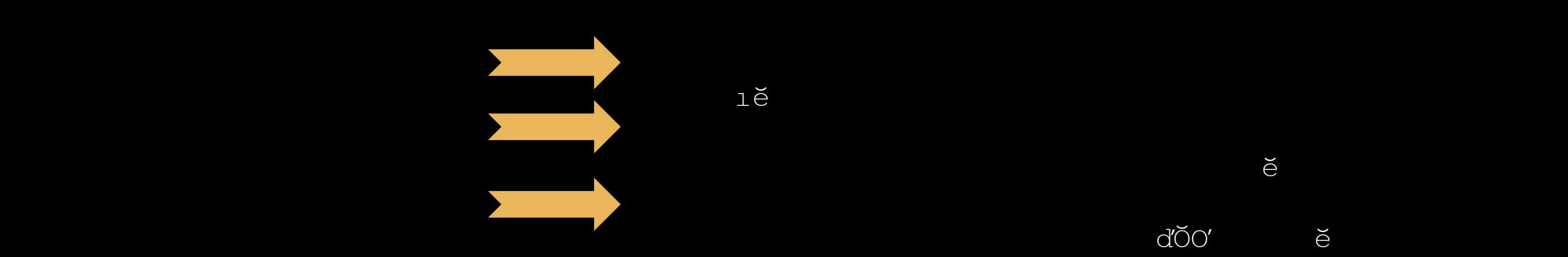
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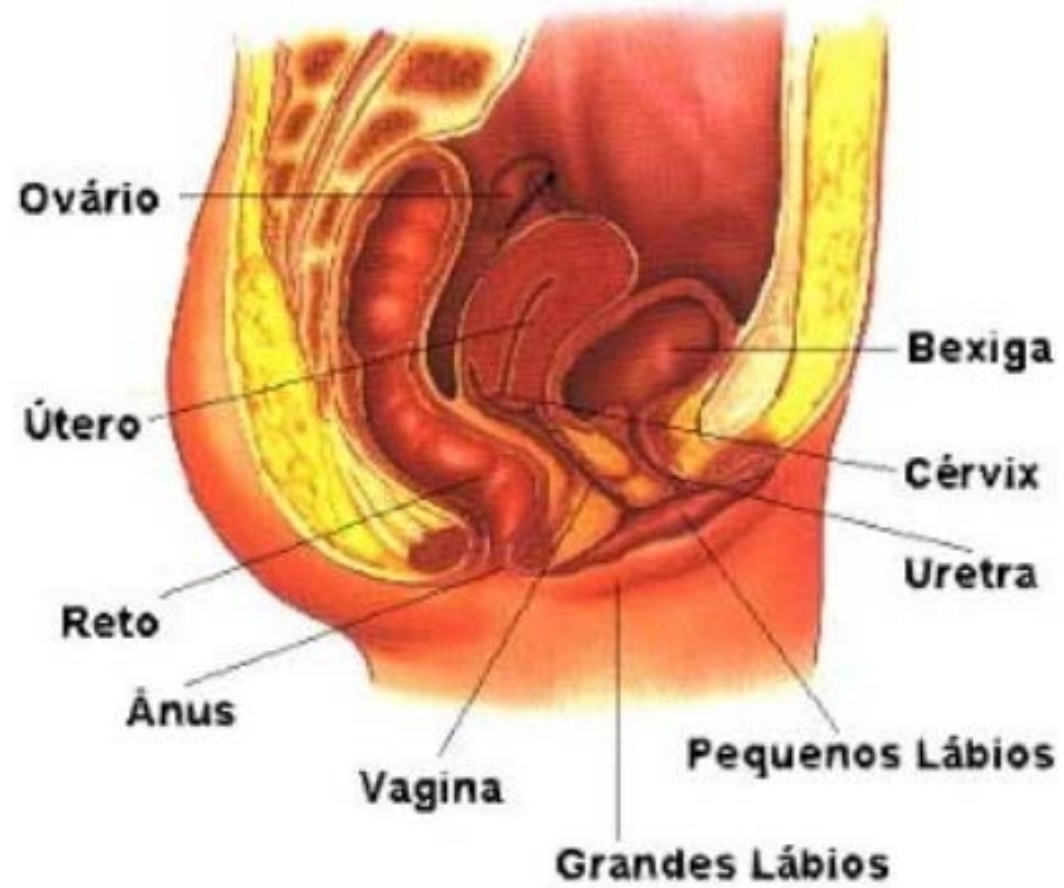
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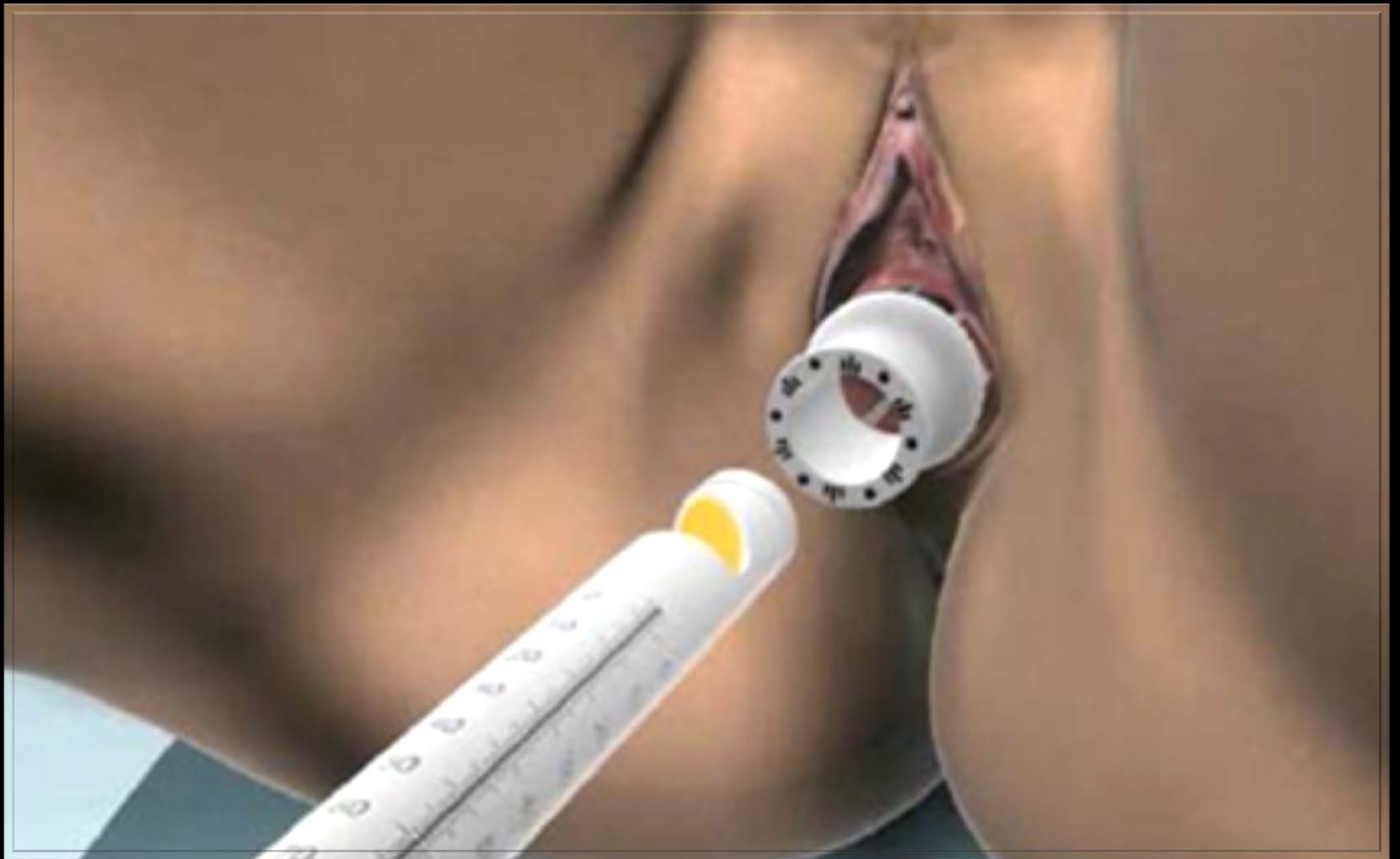


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Non Invasive Treatment of SUI with CO2 Laser

Author:

Alexandros Bader MD, FAAOCG

Introduction:

Stress Urinary Incontinence (SUI) is defined as involuntary urine leakage. This is a very common phenomenon among young women with history of multiple vaginal deliveries or with one destructive delivery. SUI is considered one of the most distressing problems for young females with a distinct element of quality of life implications. SUI is caused due to the loss of urethral support, usually as a consequence pelvic support structure damage.

Histological changes in the vaginal wall structure, also has an important affect on the support system of the urethra underside, especially under the mid urethra. These patients usually report leakage of a small amount of urine during activities that increase abdominal pressure such as coughing, sneezing and lifting of heavy weights.

Treatment using non ablative CO2 Laser energy under the mid urethra with a three (3) session repetition once a month shows a distinctive and reportable improvement of the symptoms.

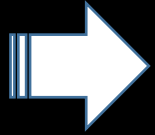


Figure 1: Colposcopy Picture of the upper vaginal wall before the 1st application with Non Ablative CO2 Laser, “FemiLift”

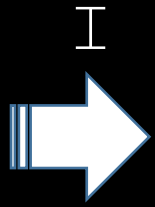


Figure 2: Colposcopy Picture of the upper vaginal wall after the 1st application with Non Ablative CO2 Laser “FemiLift”

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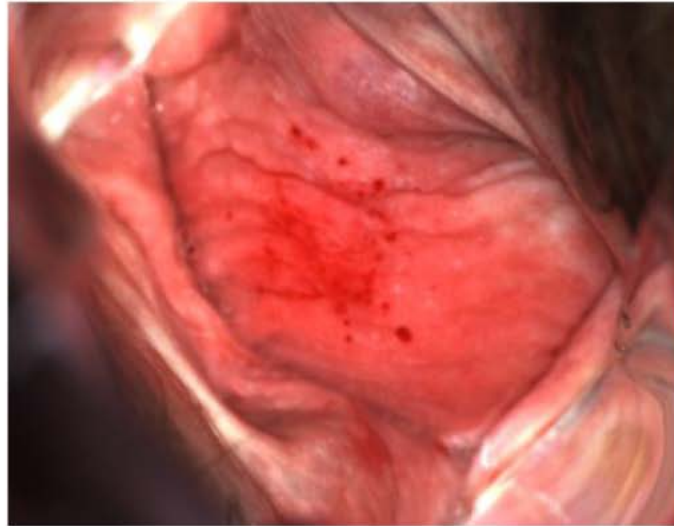


Figure 3: Colposcopy Picture of the vaginal wall one month after the application of 2nd session of Non Ablative CO2 Laser “FemiLift”

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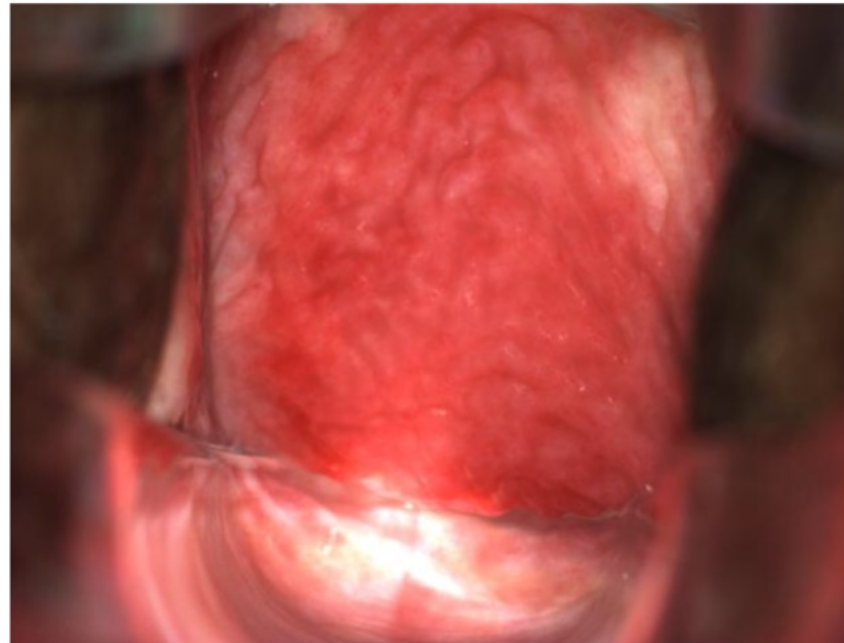


Figure 4: Colposcopy Picture of the vaginal wall one month after the application of 3rd session of Non Ablative CO2 Laser “FemiLift”

	1	2	3	4	5
Pain during procedure					•
Pain after procedure				•	
Satisfactory after 1 st session		•			
Satisfactory after 2 nd session					•
Satisfactory after 3 rd session					•



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LITERATURE REVIEW

Laser procedure for female urinary stress incontinence: A review of the literature

Traitement laser de l'incontinence urinaire d'effort chez la femme : revue de la littérature

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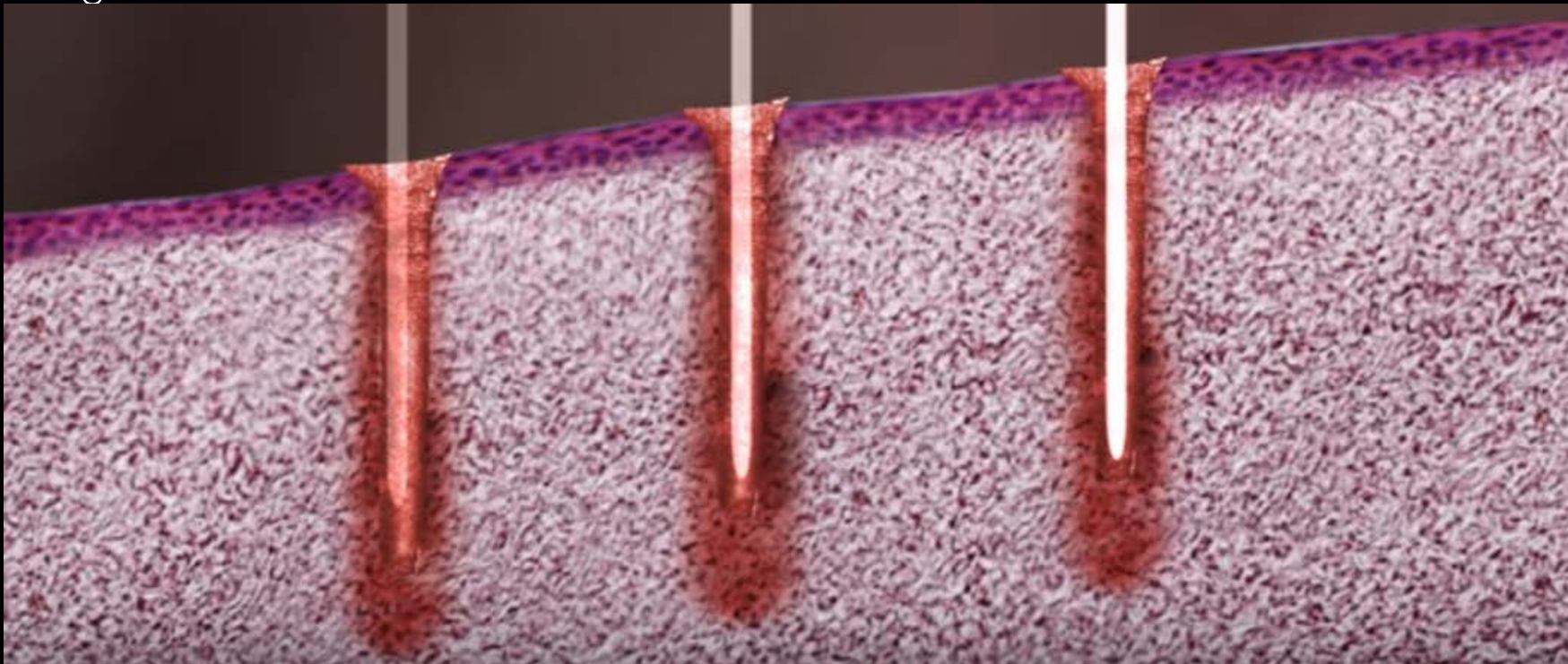
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EDITORIAL

Laser treatment in urogynaecology and the myth of the scientific evidence

G. Alessandro Digesu^{1,2}  • Steven Swift³

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In 2015, we published an editorial in the *International Urogynecology Journal* on laser vaginal rejuvenation [1]. We questioned the literature and science behind the popular and trendy claims that laser vaginal treatment improved stress urinary incontinence and certain aspects of vaginal atrophy/sexual function, as they had not yet been substantiated by a significant

procedures for managing important aspects of vulvovaginal atrophy and/or “genitourinary syndrome of menopause (GSM)” and urinary incontinence in the last 3 years has increased significantly worldwide, mainly because of media advertising and manufacturer’s marketing policy. To date, there have been approximately 15 laser companies on the market advertising laser

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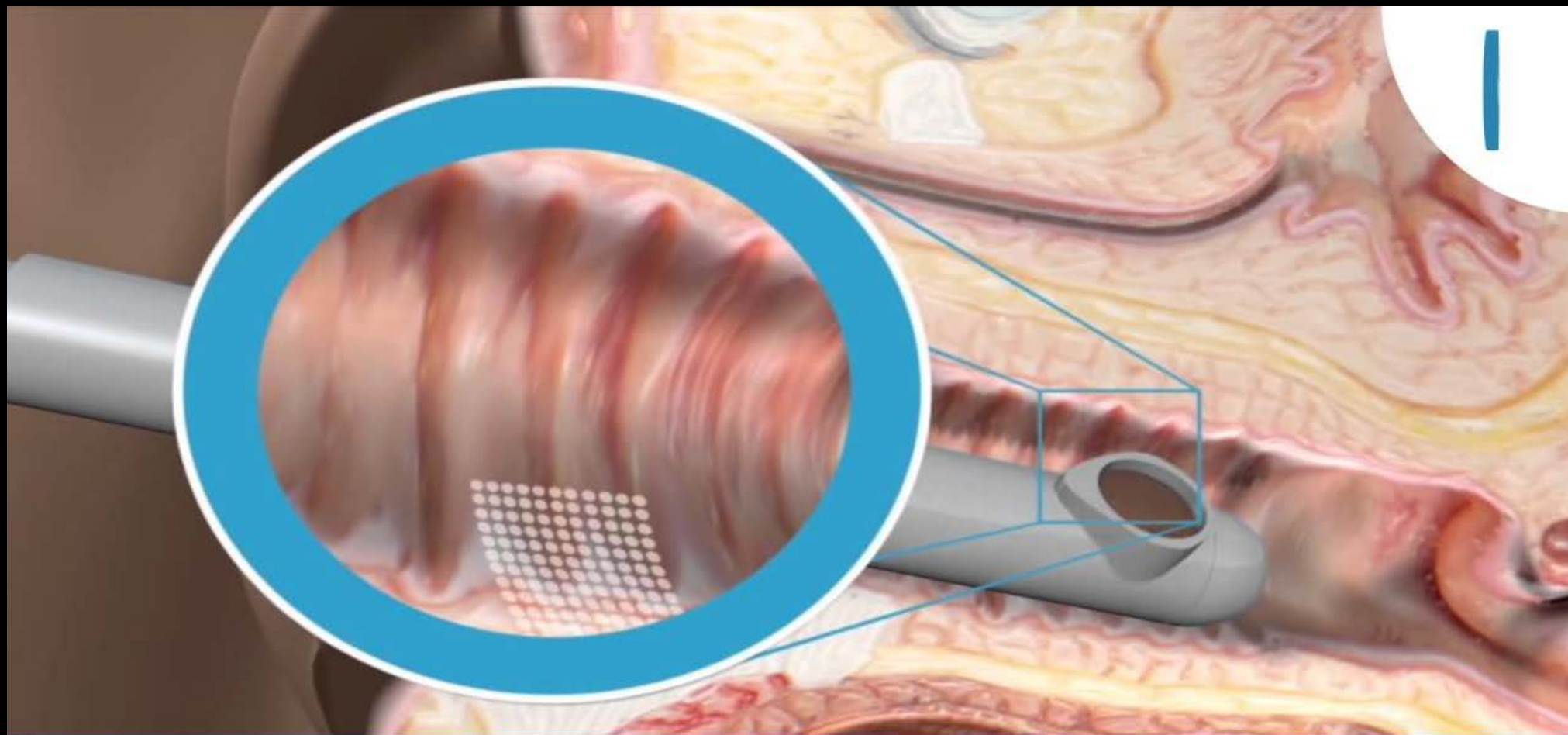
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REVIEW ARTICLE

A systematic review on vaginal laser therapy for treating stress urinary incontinence: Do we have enough evidence?

Vasilios Pergialiotis¹  · Anastasia Prodromidou¹ · Despina N. Perrea¹ ·
Stergios K. Doumouchtsis^{1,2}

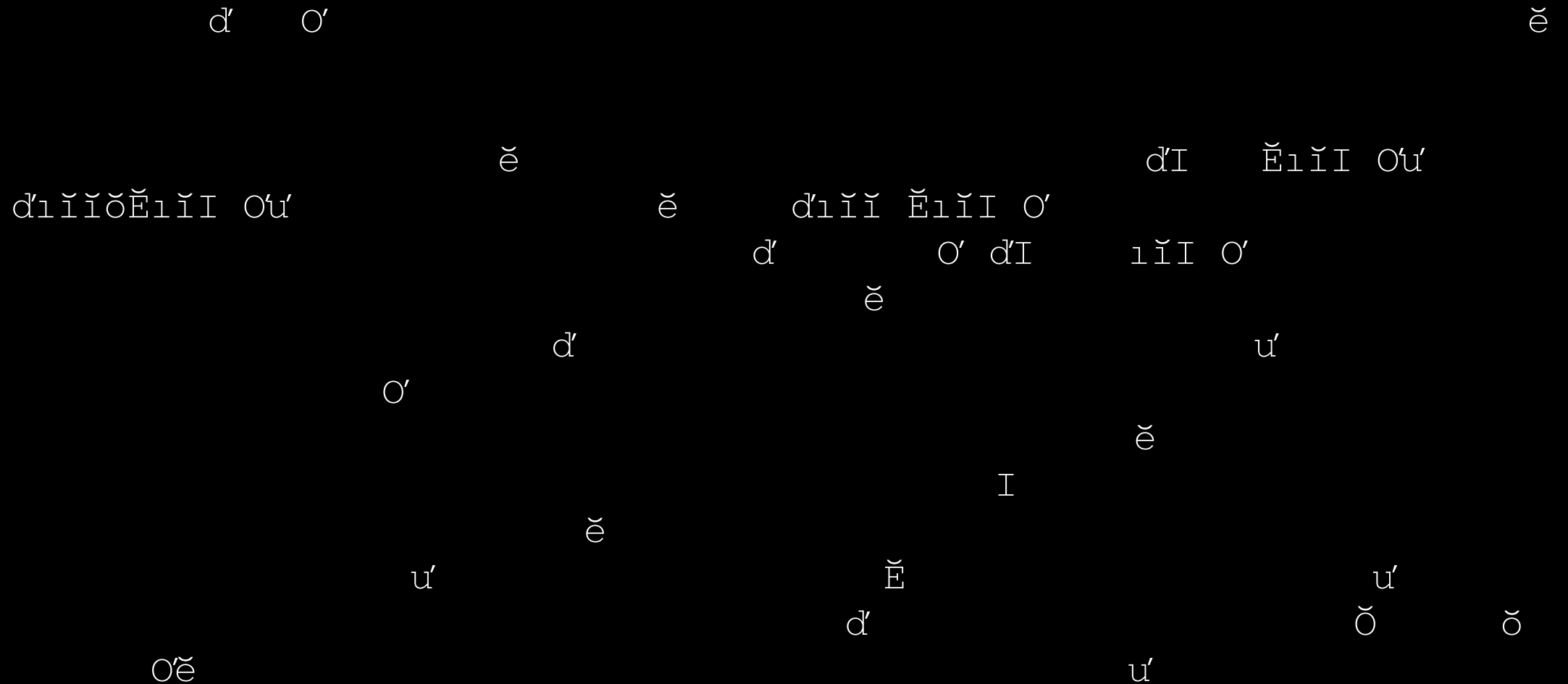
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Abstract

Introduction and hypothesis Current treatment strategies for stress urinary incontinence (SUI) raise concerns about safety and efficacy. The purpose of this systematic review was to

Conclusions As the demand for minimally invasive approaches for treating SUI increases, it is expected that more patients will seek alternative treatments over current standards (midurethral slings). Given the limitations of the existing stud-

Estratégias no Tratamentos da IUÉ



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