Urinary Incontinence



Don't put up with it!

Speak to your physician!

A patient's guide to types and treatments of Male Urinary Incontinence

What is urinary incontinence?

Urinary incontinence is uncontrollable leakage of urine. It is not a disease, but rather defined as a symptom. Typical cause of incontinence is the surgical removal of the prostate and the subsequent malfunctioning of the urethral sphincter muscle.

Types of urinary incontinence

To establish whether you are suffering from ongoing urinary incontinence, you must first undergo all the conservative forms of therapy such as pelvic floor muscle training, and let at least six to nine months pass after having had the prostate surgery. Should incontinence persist, the only means of improvement or cure may be an implant to support the sphincter function.

In principle, we can distinguish between three grades of urinary incontinence following prostate surgery:

- **Grade I:** Slight loss of urine during strenuous physical activity, no loss when lying down.
- **Grade II:** Moderate loss of urine during gentle physical activity or when changing position, no loss when lying down.
- **Grade III:** Severe loss of urine even without physical exertion and sometimes loss even when lying down.

Total urinary incontinence

In addition to the classification into three grades, total urinary incontinence (a form of grade III incontinence) is the immediate complete loss of the whole amount of urine without any possibility to hold back for at least a few seconds.

Treatment Options

Non-surgical treatments

After undergoing radical prostatectomy surgery, many men suffer from transient incontinence, which will disappear after a few months. Conservative methods for treating incontinence include:

- Pelvic floor muscle exercises
- Electrostimulation
- Bladder training
- Changing the drinking regime (reducing the amount of fluids, avoiding substances like coffee that can irritate the bladder)

If incontinence does not disappear within the first year after prostatectomy, your doctor may prescribe surgical treatment.

Surgical treatments

- Bulking agents
- Implants

The implants are based on the same principle: they prevent or reduce involuntary loss of urine by compressing the urethra.

ATOMS System

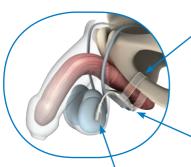
Why have an implant? Why should it be adjustable?

ATOMS is a long-term adjustable implant and is suitable for all grades of incontinence apart from total urinary incontinence. Unlike most other systems currently available, ATOMS can be adjusted without further surgery and needs no manual operation of mechanical parts (e.g. pumps) by the patient.

Once the system has been adjusted by your doctor to suit your individual level of activity, all you need to do is let ATOMS do its job!

What does the surgery involve?

The operation is minimally invasive and generally takes no longer than 30 to 60 minutes. It is usually carried out under general or spinal anaesthesia. The implant is inserted through a small incision under the scrotum, and the central cushion is positioned directly under the urethra. The surgeon then uses a transobturatoric approach, which has been tried and tested during thousands of sling implantations in women, to draw the mesh arms around a bony structure under the skin, and thereby securing the system firmly in place. A port made of titanium and silicone is then implanted into the scrotum. This port is necessary for later adjustments to the system.



Mesh arms loop around the bone and secure the implant in place

The substitute sphincter cushion exerts indirect pressure on the urethra, thereby effecting continence

The titanium port, for filling and draining the sphincter cushion

Some patients experience dryness directly after the operation. However, the patients that are not dry after the operation, must wait 3 to 4 weeks until the surgical area has healed for the first adjustment.

How is ATOMS adjusted?

The ATOMS system can then be adjusted to suit the patient's individual requirements by means of the port, which was implanted in the scrotum. The doctor injects the port with fluid, which then travels through the catheter to fill the cushion lying under the urethra. As the cushion fills, the pressure on the urethra softly increases. In future, this correctly-adjusted pressure will allow the patient to better hold the urine. It is likely that several adjustments will be required to find the ideal filling volume for each patient.

What advantages does ATOMS offer?

The main advantages of the system are the adjustability and firm attachment by means of the mesh arms. No reoperation is necessary for adjustments, and the secure fixation ensures the system will not dislocate. It remains in place for maximum effect. Another advantage is that the implant contains no mechanical components - it is not required to operate or activate any part to make the system work or to urinate. The system is designed for a life-long adjustment, which can be done by the doctor very easily.

Frequently asked questions

Can my bladder be examined or operated on with the implant in place?

Yes. For a routine bladder examination with ultrasound, no special precautions need to be taken. In the case of surgery (endoscopic through the urethra) e.g. for ureteral stones, the ATOMS can be emptied before the procedure is carried out. We strongly recommend consulting a surgeon familiar with ATOMS, ideally one who has experience.

What types of physical activity should I avoid?

It is advisable to refrain from doing sports such as horse riding and bike riding, which place added pressure on the implant. In some cases a special bike saddle may help if recommended by your surgeon. It has to be considered that every added pressure on an implant may compromise the longevity and effectiveness of such an implant. Apart from this, there are no other major physical restrictions and you should be able to resume your usual lifestyle after the wounds have healed.

Can I have X-rays or an MRI scan with the system in place?

Yes. The whole implant including the titanium port is non-ferromagnetic, which means any type of medical imaging examinations (X-ray, CT, MRI, ultrasound) can be carried out safely. However, please show your implant pass to the staff before any such examination.

What side effects are to be expected?

ATOMS consists of bio-compatible, tested components. It is primarily made of medical grade silicone, titanium and polypropylene, which are used since decades on a daily basis for the manufacture of various medical products. Adverse patient reactions are seldom, however as with any implant, there are always risks that your surgeon will explain in detail. More common side effects are direct post-operative perineal pain, which may continue for more than two weeks, and numbness or increased sensitivity around the scrotum, glans or groin.

The effectiveness of the therapy with ATOMS cannot be guaranteed and depends on a variety of factors, e.g. degree of incontinence, general health index before surgery, etc.. Please consult your doctor in detail about all possible risks and side effects.



It is mandatory to speak in detail with your physician about all potential risks and benefits of the procedure!

Important note:

This patient guide includes general information about male urinary incontinence and the corresponding treatments. However, it is by no means a substitute for a consultation and thorough examination by your doctor. Only your doctor can evaluate your personal situation and recommend the treatment and aftercare best suited to your needs, as well as inform you of possible risks.

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