



Obturator nerve entrapment after retropubic tension-free vaginal tape insertion

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Case presentation

After retropubic tension-free vaginal tape (TVT) insertion for stress urinary incontinence, a 52 year old woman reported severe, sharp, right hip and groin pain and thigh muscle weakness, worse on adduction. Prolonged standing or walking was not possible. Electromyography (EMG) revealed an impairment of the right obturator nerve function. The sonographic and radiological examinations were unrevealing, a hematoma was ruled out. Analgesic therapy was ineffective.

The right TVT-arm was partially removed by laparotomy 14 days after the initial surgery and 2 days after referral to our hospital. The woman recovered without motor deficits and maintenance of continence. The obturator nerve entrapment was caused by a too lateral needle passage on the right side. The TVT arm passed the retropubic space lateral to the obturator nerve and medial to the external iliac vein (Fig. 1).

Discussion

Brubaker et al. showed that neurologic adverse events were more common after transobturator than after retropubic midurethral slings (9.7 versus 5.4%). In their study most neurologic symptoms were mild in nature and had resolved

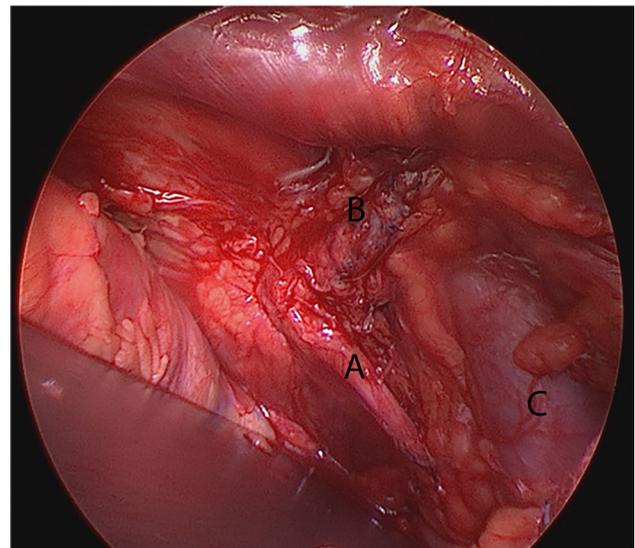


Fig. 1 Intraoperative view of the right TVT arm passage through the retropubic space. **A** Obturator nerve, **B** Retropubic TVT arm, **C** Internal iliac vein

6 weeks postoperatively [1]. The obturator nerve entrapment is an extremely rare complication and requires surgical intervention.

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Declarations

Conflict of interest The authors declare that they have no potential conflict of interest.

Consent to publish The authors affirm that human research participants provided informed consent for publication of the image in Fig. 1.

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Reference

1. Brubaker L, Norton PA, Albo ME et al (2011) Adverse events over two years after retropubic or transobturator midurethral sling surgery: findings from the trial of midurethral slings (TOMUS) study. *Am J Obstet Gynecol* 205:498.e1–6. <https://doi.org/10.1016/j.ajog.2011.07.011>

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