Frequently asked questions

- Q. Does AUS placement work?
- A. Yes. About 90% of men will achieve continence after AUS placement, meaning 0-1 pads per day. The device is not perfect, and leakage can still occur with strong coughs or exertion. 90% of patients report satisfaction with the device, and 96% would recommend the device to a friend.
- Q. What happens if the AUS breaks?
- A. The AUS is a mechanical device and does not work forever. The average device lasts **7-10 years**. When it breaks, a man will start leaking urine again. The device **can be replaced** through a similar surgical procedure when this occurs.
- Q. Are there other options?
- A. The decision to have surgery for male incontinence is a personal one. Some men will choose to continue Kegel exercise or live with their leakage. Working with a pelvic floor physical therapist can also help build strength. For men with mild to moderate leakage and no history of radiation, the AdVance XP Male Sling is a potential surgical alternative.
- Q. What are the risks of surgery?
- A. There is a small risk of bleeding from the operation. There is a risk of device infection (2-3%) that would require the device to be removed. Your surgical team takes every possible precaution to limit the risk of infection. There is a risk that, over time, the cuff could erode into the urethra (2-3%). This would require device removal. In either case, a new device could be placed after you have healed from the removal.

Notes

Mass General Brigham

https://www.massgeneralbrigham.org

Department of Urology
https://www.brighamandwomens.org
/surgery/urology





Artificial Urinary Sphincter (AUS)

A procedure for urinary incontinence



Patient instructions and information

What is an AUS?

The artificial urinary sphincter (AUS) is used to treat stress incontinence which is caused by urinary sphincter dysfunction (usually after prostate surgery, radiation, or resection of the prostate).

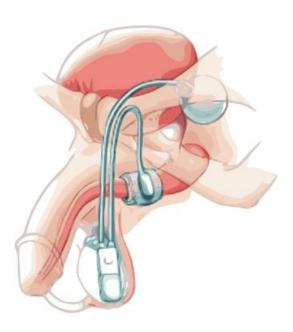
An artificial sphincter consists of:

- · A cuff that fits around the urethra
- A pressure regulating balloon that inflates the cuff
- A pump that fits inside the scrotum

To treat urinary incontinence, a cuff is placed around the urethra so that when it is inflated, the urethra closes tightly.

The pressure-regulating balloon is placed under the tissues of the lower abdomen. The balloon is then filled with liquid.

The control-pump mechanism is placed in the scrotum. To use the sphincter, compress (squeeze) the pump so that fluid is diverted from the urethral cuff to the balloon. This action enables the sphincter to relax, which in turn, enables you to urinate. The cuff reinflates on its own in several minutes.



What to expect

AUS insertion usually takes **90 minutes**. You will be put under anesthesia before the surgery. This means you will be deeply asleep and will not feel anything during the procedure.

- The device is placed through two small incisions: one in the lower belly and one in the perineum (area between scrotum and anus).
- Once the procedure is over, you will be brought to the PACU (Post-Anesthesia Care Unit) to allow the anesthetic to wear off. Patients are generally allowed to go home the same day but will sometimes be asked to stay overnight.
- Make sure you plan for a family member or friend to drive you home after the procedure.

After your procedure

The device will be **deactivated** while you recover from surgery. This means you will continue to leak urine. The device is activated ("turned on") in clinic **6 weeks after surgery**.

- You should avoid strenuous activity and heavy lifting for 6 weeks after surgery
- You will have a catheter inserted into your penis to remove urine out of your bladder. The catheter is usually removed during surgery or the next day.
- You should avoid strenuous activity and heavy lifting for 6 weeks after surgery.
- Increase fluid intake and eat fiber-filled foods after surgery. This will help to avoid straining during a bowel movement.
- You should plan to be out of work for at least a week following surgery. Your ability to return to work after surgery depends on your work requirements.

Post procedure symptoms

These symptoms are **normal for 4-5 days** after your procedure:

- Swelling of the scrotum; try ice packs and tight-fitting underwear to minimize the swelling
- Bruising of the scrotum or lower belly
- Mild discomfort with urination

These symptoms are **abnormal**—please call the Urology clinic if you have any of the following symptoms:

- Trouble urinating
- Changes in your urine output, color, or odor
- Increasing blood or clots in your urine (dark red clots the size of a quarter or larger)
- Fever above 101° F and/or chills



AUS Quick Facts

The AMS Sphincter 800 Urinary Control System from Boston Scientific (also called the artificial urinary sphincter or AUS) provides patients simple, discreet urinary control.

The device is implanted entirely within the body. It simulates natural bladder function by mimicking the action of a healthy sphincter muscle.

Since 1972, more than 800,000 devices have been implanted in men throughout the world. The AUS remains the most effective treatment option for male incontinence following prostate surgery.

Medicare and most private insurance carriers cover the AUS. Patients should verify their individual coverage with their insurance carriers.