

Colposuspension surgery has traditionally been the most commonly performed surgical treatment for urethral sphincter mechanism incompetence (weakness of the urethra) in female dogs.

**What does it involve?**

Under general anaesthesia, permanent stitches are placed between the vagina and body wall to move the bladder forward within the abdomen. This increases the functional length of the urethra and reduces pressure differences at the bladder neck to improve continence.

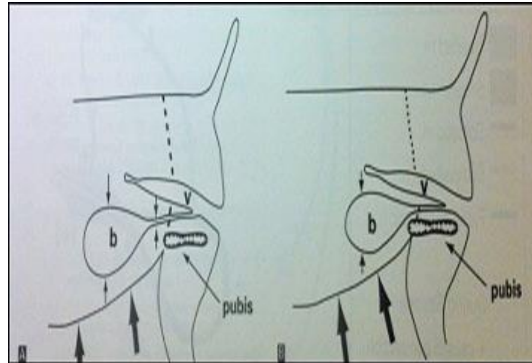


Illustration of normal intraabdominal bladder position (left) and pelvic bladder (right). From Bojrab's *Mechanisms of Disease in Small Animal Surgery*, 3<sup>rd</sup> ed.

**What aftercare is required?**

Patients generally recover very quickly from this procedure, but are kept hospitalised overnight to monitor urination. They are discharged as soon as they are seen to have produced a normal stream of urine with no straining.

Once home, patients require 4 weeks of strict rest to allow strong adhesions to form at the suture sites and can have short lead walks only. After this time, activity is gradually increased back to normal.

**What is the likely outcome?**

Following colposuspension surgery, 50% of patients will be completely dry, a further 40% will be improved compared to pre-operative incontinence scores and 10% of patients will show no improvement. In some cases improvement may not be sustained long-term.

**What are the potential complications?**

Complications are fortunately rare following this procedure, but infection, wound breakdown, seroma formation, difficulty urinating and suture breakage leading to surgical failure are all possible sequelae.