



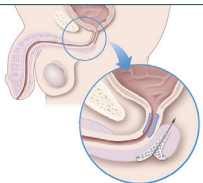
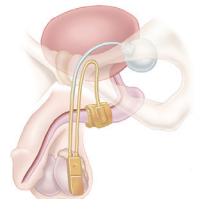
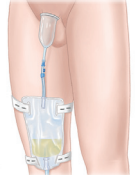
A PATIENT OVERVIEW



Your treatment options for
Stress Urinary Incontinence (SUI)

Overview of treatment options for male stress urinary incontinence (SUI)

Individual results may vary and are not predictive of results in other cases. Consult with your doctor to decide the option most suited for you.

	Treatment satisfaction and attributes	Some possible side effects	Characteristics	Typical duration of use
 Male sling A sling made of soft mesh implanted inside the body to reposition the urethra and provide support to surrounding sphincter muscle. This can help to keep the urethra closed, especially when coughing, sneezing, and lifting.	• 79.5% surveyed would have the AdvVance™ XP Male Sling procedure again³ • 88% surveyed would recommend the AdvVance XP Male Sling to a friend³ • More than 10 years of clinical use • Assists natural continence function • Surgical treatment	• Device failure • Urinary retention • Postoperative pain • Irritation at the wound site • Foreign body response	• Long-term treatment option • Sling acts as a "hammock," repositioning and supporting the urethra to help restore normal bladder control • Made of synthetic mesh • Placed entirely inside the body, making it undetectable to others • No mechanical components that require operation	• Permanent implant • Demonstrated cured and improved rates ranging from 63% to 83% at 5 years in patients with mild to moderate incontinence^{4,5} • All alternate options still available if the sling loses effectiveness
 Artificial urinary sphincter The artificial urinary sphincter (AUS) is placed inside the body. A fluid-filled cuff keeps the urethra closed and a pump in the scrotum allows urination on demand. The AUS is indicated to treat SUI following prostate procedures and is considered a gold standard for moderate to severe male stress urinary incontinence.	• 90 to 94.7% of patients* are satisfied with their AMS 800™ Artificial Urinary Sphincter (AUS)⁹ • 94% or more would recommend the AMS 800 AUS procedure to a friend¹⁰ • More than 50 years of clinical use of the AUS, with over 250,000 systems sold worldwide • Placed entirely inside the body, it is undetectable to others • Natural-acting elimination • Surgical solution • Functions all day and night *Urethroplasty vs non-urethroplasty, respectively	• Device malfunction or failure, which may require revision surgery • Erosion of the urethra in the cuff area • Urinary retention • Postoperative pain	• Long-term treatment option • Three-part urinary control system contained completely in the body • The control pump is implanted in the scrotum • The inflatable cuff is placed around the urethra • The fluid-filled pressure regulating balloon (PRB) is usually implanted in a natural, open space next to the bladder • Designed to treat male SUI following prostate procedures • Mimics a healthy sphincter, allowing patients to urinate when desired • Requires good cognitive ability and manual dexterity • AUS is considered a gold standard treatment for male SUI¹⁵	• Ongoing, with device replacement only as needed • One study of 57 patients found approximately 90% long-term patients are satisfied overall with their AMS 800 AUS^{11**} **10+ years
 Absorbent products Incontinence pads are commonly used to help absorb urine leakage, protect the skin and block odor. Other absorbent products include diapers and undergarments. These products can offer odor control; some are disposed after a single use; others may be cleaned and reused.	• Appropriate for everyday activities • Comfortable when dry • Good for overnight • Easy to use	• Requires changing, up to several times per day • Can leak • Uncomfortable when wet • Expensive over time	• Pads, liners, or undergarments typically have a waterproof backing • Some products contain a breathable plastic film that helps reduce skin irritation	• Requires frequent changing on an hourly/daily basis
 External collection devices Condom catheters or a penis pouch are placed on the penis so urine can flow into a drainage bag. Urine collection bags are strapped to the body underneath clothing during the day and may rest bedside at night.	• Discrete option for long periods of time • Keeps skin dry • Avoids odor issues • Convenient for storage and travel	• Device can move or loosen resulting in leaks • Irritative or allergic reactions can occur based on material¹² • Long-term use may result in urinary tract infections¹²	• Typically made of silicone or latex • Uses adhesive to stay in place	• Designed to be worn 24/7 and changed daily
 Penile clamp A penile clamp uses a hinged, rigid frame that supports two pads and a locking mechanism. It controls leakage by applying constant pressure upon the penis.	• Can stop leaking • Simple to remove • Can be washed and reused	• Can only be worn for short periods of time¹³ • May be described as uncomfortable and painful • Swelling¹³ • Strictures of the urethra¹³ • Development of skin breakdown²¹	• Most have a padded, flexible soft interior of foam that conforms to fit the penis • Exterior of the clamp may be metal or plastic	• MUST be removed every 1-2 hours to allow for urination¹³ • Should not be worn 24 hours, 7 days a week¹³

Treatment options for male stress urinary incontinence (SUI)

Urinary incontinence is a common complication following prostate cancer surgery, with 15% to 90% of men experiencing incontinence at one year after surgery.¹ Incontinence, also known as bladder leakage, can stop you from living the active life you once lived and make you feel alone and isolated. For many men, leaking urine may lead to feelings of embarrassment and depression.²

With a thorough evaluation of your bladder leakage symptoms, your doctor may recommend changes to your daily routine, such as avoiding caffeine and alcohol. You may modify your fluid intake and follow a voiding schedule to try to train your bladder. Your doctor may also recommend pelvic floor exercises to tighten the sphincter muscles.

If bladder leakage persists, some men cope by using absorbent pads and protective undergarments. Others use special devices, such as catheters or penile clamps, to try to prevent urine leakage.

Long-term treatments for bladder leakage include the AdVance™ XP Male Sling System and the AMS 800™ Artificial Urinary Sphincter (AUS). Both options are placed entirely within the body for a discrete treatment option for SUI. If bladder leakage becomes a burden and affects your happiness, you can talk to a urologist specializing in male stress incontinence about options to restore bladder control, and find the right treatment for you.

Take the next step

Don't let stress urinary incontinence (SUI) stop you from living your best life. Learn about SUI treatment options, find a specialist, and hear from patients who found effective SUI treatment options.

Important Risk Information

Advance XP Male Sling System

The AdVance™ XP Male Sling System is intended for the treatment of male stress urinary incontinence (SUI). Potential risks may include, but are not limited to, inability to urinate (urinary retention), return to incontinence, infection, erosion, device migration, pelvic organ disfunction, bleeding, and pain.

These devices are contraindicated for patients with urinary tract infections, blood coagulation disorders, a compromised immune system or any other condition that would compromise healing, with renal insufficiency, and upper urinary tract relative obstruction.

Your doctor is your best source for information on the risks and benefits of Advance™ XP. Talk to your doctor for a complete listing of risks, warnings and important safety information.

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AMS 800 Artificial Urinary Sphincter

The AMS 800™ Artificial Urinary Sphincter is intended for use in the treatment of urinary incontinence (intrinsic sphincter deficiency) in adult males and females.

Patients with diabetes, spinal cord injuries or skin infections may have an increased risk of infection. Some AMS 800 devices contain an antibiotic (InhibiZone™ Antibiotic Surface Treatment). The device may not be suited for patients who are allergic to the antibiotics contained within the device (rifampin, minocycline or other tetracyclines) or have systemic lupus.

Potential risks may include, but are not limited to: device malfunction/failure leading to incontinence and/or additional surgery, wearing away/loss of tissue (device/tissue erosion), inability to urinate (urinary retention), infection, and pain/soreness.

Your doctor is your best source for information on the risks and benefits of the AMS 800™ Artificial Urinary Sphincter. Talk to your doctor for a complete listing of risks, warnings and important safety information.

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CE 2797 AMS 800™ Artificial Urinary Sphincter
and AdVance™ XP Male Sling System