

How can the Lynx™ Sling System help my incontinence?

A minimally invasive sling procedure using the Lynx Sling System provides a ribbon of support under the urethra to prevent it from dropping during physical activity. The dropping of your urethra out of the correct anatomical position is what causes your incontinence. Providing support that mimics the normal anatomy will prevent urine from leaking or significantly reduce the amount of leakage.

Questions for my Doctor

Lined area for writing questions for a doctor.

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CAUTION: Federal Law (USA) restricts this device to sale by or on the order of a physician. Refer to package insert provided with the product for complete Instructions for Use, Contraindications, Potential Adverse Effects, Warnings and Precautions prior to using this product.

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A Minimally Invasive Approach to Treating Stress Urinary Incontinence

Resuming Normal Activity



Treating Stress Urinary Incontinence

What is Stress Urinary Incontinence?

Stress urinary incontinence affects over 13 million adults in the United States alone, 85% of these adults being women. Stress urinary incontinence is the involuntary loss of urine during physical activity such as coughing, laughing, or lifting. The muscles that support the urethra (the small tube that carries urine out of the body) and bladder neck (the opening that connects the urethra to the bladder) have weakened, causing the urethra to drop during physical activity, resulting in urine leaking out of the body (see *Figure 1* and *Figure 2*). This type of incontinence can be treated both surgically and nonsurgically. The next few pages will describe a minimally invasive surgical approach called a sling procedure.



FIGURE 1: Normal urethra anatomy



FIGURE 2: A weakening of the muscles supporting the urethra causes the urethra to drop during physical activity, resulting in urine leaking.

What can I expect during my sling procedure?

Your sling procedure with the Lynx™ Sling System will take an estimated 30-45 minutes. Your doctor will determine the type of anesthesia you will have during the procedure. Once the anesthesia takes effect, your doctor will begin the procedure. A small incision will be made in the vaginal area and two small incisions will be made through the skin right above the pubic bone. Next, the synthetic mesh is placed. When the mesh is placed, it will extend from one skin incision, down towards the vagina, around the urethra and back up through the second skin incision. This creates a “hammock” of support around the urethra (see *Figure 3*).

At the end of the procedure, the doctor will trim the mesh below the skin’s surface above the pubic bone.

The incisions in the skin and the vagina will be closed.



FIGURE 3: The sling creates a “hammock” of support.

What to expect after the procedure?

Before your discharge from the hospital, your doctor and nurse will provide you information on what to expect and how to care for yourself during your recovery time. Below are a few things included in these instructions:

- ◆ You may be given a prescription for an antibiotic. It is important to take the medication as prescribed.
- ◆ You may be given a prescription for pain medication. If not, your physician or nurse may recommend an over-the-counter drug that should relieve any discomfort you may experience.
- ◆ If you need to go home with a catheter, your physician or nurse will also instruct you on how to take care of it.
- ◆ You will be instructed on how to care for your incision area.
- ◆ Routine physical activity may be restricted for a short time after the procedure. Strenuous activity may be restricted for 6-12 weeks. Your doctor or nurse will provide you with specific guidelines.