

経腹的超音波計測による骨盤臓器脱と腹圧性尿失禁患者の膣壁肥厚

菅谷 公男^{1,2,3} 嘉手川豪心^{2,3} 西島さおり³ 多和田真盛⁴ 百名 将士⁴
平敷 義隆⁴ 具志 和子⁴ 新里 尚子⁴ 松田 弘二⁴ 運天 芳浩⁴

抄 録

目的：著者らは骨盤臓器脱や腹圧性尿失禁患者の経腹的超音波検査で膣壁が肥厚している印象を持っていた。そこで、骨盤臓器脱や腹圧性尿失禁とそれらの疾患のない泌尿器科外来患者で経腹的超音波検査による膣壁の厚さ計測を試みた。**対象と方法**：泌尿器科外来を受診した女性患者のうち、臥位での経腹的超音波検査の正中縦断面写真からレトロスペクティブに膀胱三角部後方の膣前壁と後壁を合わせた厚さ（膣厚）を計測できた症例を対象とした。過活動膀胱患者と膀胱炎患者をコントロール群とし、膣厚と年齢の関連や、コントロール群と骨盤臓器脱群や腹圧性尿失禁群の膣厚を比較した。**結果**：コントロール群は178例で、年齢は 64.6 ± 18.4 歳（平均 \pm 標準偏差）、膣厚は 9.2 ± 2.7 mmで、年齢と膣厚に関連はなかった。骨盤臓器脱群は76例で、年齢は 65.1 ± 9.2 歳、膣厚は 14.7 ± 4.4 mmで、コントロール群より有意に膣は肥厚していたが、骨盤臓器脱に対するメッシュ手術後3ヵ月では膣厚は薄くなっていた。腹圧性尿失禁群は12例で、年齢は 65.1 ± 12.0 歳、膣厚は 14.7 ± 4.4 mmで、コントロール群より有意に膣は肥厚していた。尿失禁防止術の術後3ヵ月の膣厚は術前後で差はなかった。**結論**：膣壁の肥厚は膣に負荷のあることを示しており、骨盤臓器脱や腹圧性尿失禁の存在を示唆し、骨盤臓器脱や腹圧性尿失禁の診断の一助となり得ると考えられた。

Transabdominal ultrasound measurement of vaginal wall thickening in patients with pelvic organ prolapse or stress urinary incontinence

Kimio SUGAYA, SJSUM^{1,2,3}, Katsumi KADEKAWA^{2,3}, Saori NISHIJIMA³, Sinsei TAWADA⁴, Masasi HYAKUNA⁴, Yoshitaka HESIKI⁴, Kazuko GUSI⁴, Naoko SINZATO⁴, Kouji MATUDA⁴, Yoshihiro UNTEN⁴

Abstract

Purpose: The authors had the impression that the vaginal wall was thickened in patients with pelvic organ prolapse or stress urinary incontinence on abdominal ultrasonography. Therefore, we tried to measure the thickness of the vaginal wall by transabdominal ultrasonography in urological outpatients with or without pelvic organ prolapse or stress urinary incontinence. **Subjects and Methods**: Among female patients who visited our urology outpatient clinics, patients whose anterior and posterior vaginal wall thickness (vaginal thickness) could be retrospectively measured from median longitudinal section photogram of transabdominal ultrasonography in the supine position were included in the study. Overactive bladder patients and patients with cystitis were assigned to the control group, and the relationship between vaginal thickness and age was compared. Vaginal thickness was also compared among the control group, the pelvic organ prolapse group, and the stress urinary incontinence group. **Results**: There were 178 cases in the control group, with an age of 64.6 ± 18.4 years (mean \pm standard deviation) and mean vaginal thickness of 9.2 ± 2.7 mm. There was no relation between age and vaginal thickness. There were 76 cases (65.1 ± 9.2 years old) in the pelvic organ prolapse group, and their mean vaginal thickness (14.7 ± 4.4 mm) was significantly higher than that of the control group. Three months after surgery using a mesh sheet for pelvic organ prolapse, the mean vaginal thickness decreased. There were 12 cases (65.1 ± 12.0 years old) in the stress urinary incontinence group, and their mean vaginal thickness (14.7 ± 4.4 mm) was significantly higher than that of the control group, but it did not differ before and 3 months after surgery using mesh tape. **Conclusion**: Vaginal thickening indicates loading in the vagina, suggesting that there is pelvic organ prolapse or stress urinary incontinence, which may be useful for diagnosis of these diseases.

Keywords

pelvic organ prolapse, stress urinary incontinence, ultrasonography, vaginal wall

¹北上中央病院泌尿器科, ²沖縄協同病院泌尿器科, ⁴同中央臨床検査室, ³㈱サザンナイトラボラトリー

¹Department of Urology, Kitakami Central Hospital, 631-9 Kamisedo, Chatan, Okinawa 904-0101, Japan, ²Department of Urology and

⁴Department of Central Clinical Laboratory, Okinawa Kyodo Hospital, 4-10-55 Kohagura, Naha, Okinawa 900-8558, Japan, ³Southern Knights' Laboratory Co. Ltd., 1-1-823 Miyagi, Chatan, Okinawa 904-0113, Japan

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