A noninvasive, simple visual examination of the urethral meatus is a useful alternative to the Q-Tip test for detecting urethral hypermobility in women. A noninvasive, simple visual examination of the urethral meatus is a useful alternative to the Q-Tip test for detecting urethral hypermobility in women, according to results of a new prospective randomized crossover trial.\textsuperscript{1} Traditionally, the initial tests for stress urinary incontinence to determine urethral hypermobility involve the insertion of a rigid Q-Tip into the urethra—an uncomfortable procedure that can increase risk for urinary tract infections. However, a newly developed visual urethral mobility examination (VUME) may be a visual proxy for the Q-Tip test, suggest the study authors.

To determine the diagnostic accuracy of the VUME, 54 women underwent both a Q-Tip test and a VUME, which were performed consecutively by 2 different examiners. Each examiner was blinded to the other’s results. Resting angle, straining angle, and angle with levator contraction were measured for each test. For the VUME, the urethral meatus was visualized during each maneuver. The study authors defined urethral hypermobility as a maximum straining angle of 30 degrees or more above the horizontal plane. Urethral hypermobility was identified in 33 women (61.1\%) using the VUME and in 39 women (72.2\%) using the Q-Tip test. For the VUME, the finding of hypermobility was indeterminate—the examiner could not determine the degree of movement of the urethra—in only 3 participants. Using the Q-Tip test as a reference standard, the positive predictive value of the VUME was 88\%. The VUME also was found to have good validity.

Overall, patients preferred the VUME to the Q-Tip test. The VUME was rated significantly less painful than the Q-Tip test, and 83\% of women preferred the VUME over the Q-Tip test. Just 11.1\% of women stated they had no test preference.

Only 2 other noninvasive testing methods have been studied for urethral hypermobility. One is the Aa point of the Pelvic Organ Prolapse Quantification examination, but no studies to date have shown it to be reliably predictive for urethral hypermobility when compared with the Q-Tip test.\textsuperscript{2,3} The other is translabial ultrasound, which has been described as a useful tool for observing increased urethral mobility for both stress urinary incontinence and urodynamic stress incontinence.\textsuperscript{4}

Pertinent Points:
- Patients prefer the noninvasive visual urethral mobility examination to the Q-Tip test for assessing urethral hypermobility.
- Future studies should assess the diagnostic accuracy of the VUME among general gynecologists and urologists using translabial ultrasound imaging for assessment of urethral mobility as a reference standard rather than Q-Tip test, suggest the study authors.


Links: