Objectives: Due to the absence of randomized studies, the Spanish Reemex Working Group started a registry to analyze and review the results of a large group of patients with mid-term and long-term follow-up to obtain conclusions based on clinical experience. Methods: A registry of 715 patients who underwent surgical intervention for insertion of the SUI readjustable prosthesis Reemex TRT (tension free readjustable tape) in 15 Spanish hospitals (40% urology departments, 60% gynecology departments). The registry was established to evaluate the safety and efficacy of the sling adjustability concept in the surgical treatment of female SUI. The Spanish Working Group was able to evaluate results of the Reemex system in 683 patients of a total of 715. Mean age was 59.9 yr. (range 21-87) with a mean follow-up of 23 months (6-93). The group includes: 30.2% patients with mixed incontinence, 73.1% patients with urodynamic intrinsic sphincteric deficit, 35.7% patients with previous history of failed surgical interventions for urinary incontinence, and 54.3% previous pelvic floor associated operations. All patients were evaluated preoperatively with history, physical examination and urinary incontinence questionnaire. Each follow-up visit included incontinence questionnaire, physical examination and stress test. Results: Cure rate was 92.2%, with 6.9% improvement and 0.9% failures. Readjustment was performed in 416 patients (60.9%) as a second phase of surgery over the following 24-48 hours, before hospital discharge. 80 patients (60.9%) as a second phase of surgery over the following 24-48 hours, before hospital discharge. 80 patients (11.7%) were readjusted in the mid- or long-term (between 6 and 8 months after surgery). The level of support of the sling was successfully reduced in three patients between 6 and 14 months after surgery. No other patient suffered voiding difficulties in the long-term. 1.7% of the patients needed extraction of the tensor due to persistent abdominal wall seroma. 0.8% presented vaginal extrusion of the sling. Conclusions: The Reemex system is a minimally invasive technique with consistent results and even improved in heterogeneous groups of patients including intrinsic sphincter deficiency, reoperations, mixed incontinence and associated pathologies.