

LONG-TERM FOLLOWUP OF STENT FOR THE TREATMENT OF NEUROGENIC VOIDING DYSFUNCTION

Hypothesis / aims of study

To evaluate the long-term effect of stent for the treatment of neurogenic voiding dysfunction.

Study design, materials and methods

26 patients with neurogenic bladder underwent stenting of the external urethral sphincter. With a mean followup about 5 years, the effectiveness(residual volume, hydronephrosis, renal function test) and complication parameters were compared with preoperative ones.

Results

9 of the 26 stents were removed for complications, which included stent migration(five), blockage encrustation and stone formation(three), and erosion into the urethra(one). 17 stents were preserved at the last followup, with two undergoing lithotripsy, four undergoing polyp resection by Holmium laser and one repositioned. Postoperative serum creatinine and blood urea nitrogen were comparable with that before operation. Residual volume and hydronephrosis improved significantly after stent insertion.

Interpretation of results

Our results agree with other reports. Stent insertion is a reversible, microinvasive, effective method. It reduced significantly the residual volume and relieve hydronephrosis, thus protect the renal function. However, complications do occur which may necessitate removal.

Concluding message

For patients with neurogenic voiding dysfunction, stent insertion is a reversible, microinvasive, effective method. It reduced significantly the residual volume and relieve hydronephrosis, thus protect the renal function(1). However, complications do occur which may necessitate removal.

References

1 Chancellor MB et al. Management of sphincter dyssynergia using the sphincter stent prosthesis in chronically catheterized SCI men. *J Spinal Cord Med*, 1995, 18:88-94.

Disclosures

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