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REASONS OF FAILURE IN URODYNAMIC STUDY: ANALYSIS OF 1080 CASES

Hypothesis / aims of study

To investigate the reasons of failure in urodynamic studies.

Study design, materials and methods

Urodynamics were performed in 1080 cases of patients with bladder and urethral dysfunction with the use of BONITO-II type urodynamic apparatus of Laborie Company, including fulling urinary bladder pressure measurement, pressure-flow study, static and voiding urethral pressure description. We use F8 double-lumen (CAT208) or three-lumen (CAT307) catheter in transurethral catheterization in testing.

Results

Urodynamics were carried out smoothly in 980 cases and in another 48 cases with the aid of rectal touch. Failures happened in 52 cases, all of whom were male, owing to the bladder catheterization difficulty. Cystoscopy were performed in 49 of all the failure cases, including 28 Bladder neck contracture, 5 anterior urethral stricture, 12 prostatic recess, 4 posterior urethral stricture. In the rectal touch group, fever happened in 14 cases, who were cured by anti-infection treatment.

Interpretation of results

Bladder neck contracture is the most common cause of failure in urodynamics.

Concluding message

Bladder neck contracture is the most common cause of failure in urodynamics. Rectal touch as an assisted practice in catheterization is not recommended because of a high incidence of fever.

Disclosures

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