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Title:	TREATMENT OF INCONTINENCE AFTER FAILED BLADDER NECK RECONSTRUCTION
	WITH TEFLON INJECTION

Aims of study :

Incontinans after the surgical treatment for extrophy and/or epispadias anomalies is a major problem. The incidence rate differs from 18 to 55 % in different series. The incontinence types are sometimes true ,sometimes stress and most of the times only nocturnal. The incontinence that appears after the primary closure of the defects is usually treated with bladder neck construction. Unfortunately the results of this reconstruction are not 100% satisifactory. The child is still incontinant. Therefore we are always in need of another additional treatment when the bladder neck reconstruction fails.

Methods :

_Four children with extrophy epispadias complex and 5 with only total epispadias anomaly who were treated with primary closure prior to their bladder neck reconstruction operation are taken to this study. All of the patients were incontinant.

Four children were wet day and night ,2 children were dry for more than three hours during the day but wet at night and 3 were only wet at night. Urodynamically all patients had good bladder capacity and good detrussor pressures. Leak point pressures showed low urethral resistance. Submucosal Teflon (Urethrin) injections to four quadrant at the bladder neck were performed to all children. Only four children required a second injection at the same sites two weeks after the first injections.

<u>Results :</u>

The results achieved six months after the treatment are as follows : Eight out of nine children were completely dry (89 %). Only one male child who had had extrophy epispadias complex was still incontinant at night time but dry at the day time at least at 3 hours intervals. The consequences of this treatment are also verified urodynamically.

Conclusion :

<u>_</u>Re-operation or artificial urinary sphincter placement are usually advised after a failed bladder neck reconstruction. However bladder neck injection of Teflon or similar materials gives good results. The method is safe, inexpensive and repeatable.