NEW Continent Augmentation cystoplasty with Umbilical Cateterisable Stoma

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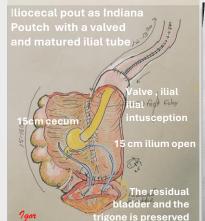
Obstetric fistula with total destruction of the bladder neck and urethra remains a devastating condition in many parts of the world, particularly sub-Saharan Africa. Diversion will be the best solution, but which diversion remain unclear

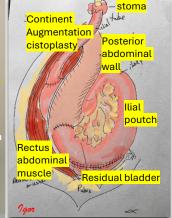
a new continent urinary diversion technique using a J-shaped ileal or ileocecal neobladder Studer and Indiana poutch modification with a Matured and valved cateterisable umbilical stoma providing a good continence, cosmetic excellent result.

"no one will be left behind"

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19 patients underwent the procedure between 2018 and 2023. Constructing a low-pressure ileal or iliocecal reservoir (Studder and Indiana Poutch Modification) without cystectomy or ureteric reimplantation.

One ilial long arm, J-pouch is tapered to form a cateterisable channel, is valved and tunnelled through the rectus abdominis and externalised at the umbilicus, as a hidden stoma preservation of the residual bladder and the trigone and ureters save time and complications.

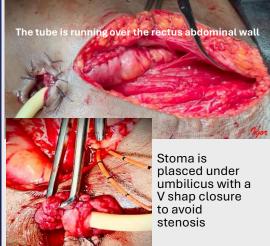


DIVERSIONS to the sigmoid should be avoided due to the complications

ICS - abdominal stomas of the ICS not well accepted cosmetically and for absence of appliances

CONTINENT CATHETERIZABLE BLADDERS have shown acceptable levels of complications and are extremely well accepted in Africa, but Mitrofanoff have a higher ness of stenotic complications

GOOD CONTINENCE WAS ACHIEVED IN THE LAST 19 SUBMITED TO THE DIVERSION



7	Tip of surgery	Nº of cases	continence	Renal function	Heandling dificulties	Cosmetic	Folowing the advises
	Matured and valved ilial tube in augmentation cistoplasty	12	Good	No modification	no	good	good
	Matured and n valved ilial tube neo cistoplasty	3	good	No modification I case worst	no	good	good
	Matured and Valved ilial tube in a neo bladder from bowel	4	good	No Modification	I cases strictures	good	good
	Total	19	Good				good