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CARMEL MEDICAL CENTER

Does Preoperative Urine Screening and Treatment of Asymptomatic Bacteriuria Reduce Postoperative Urinary Tract Infections in Pelvic Reconstructive Surgery ?

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Hypothesis

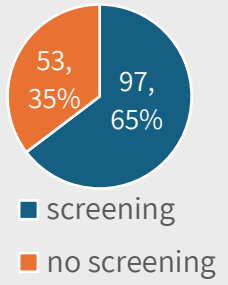
- Postoperative urinary tract infection (UTI) is a common complication after prolapse repair surgery.
- Evidence supporting preoperative screening and treatment of asymptomatic bacteriuria (ASB) is limited.
- **Aim:**
  To evaluate whether routine urine culture and treatment of ASB reduces the incidence of post operative UTI. Secondary objectives were to assess if such strategy reduces the rate of other postoperative complications.

Methods

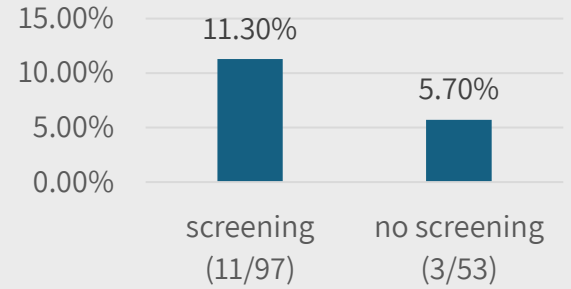
- **Design:**
  Retrospective cohort, single-center (2018–2024).
- **Population:**
  Women undergoing reconstructive pelvic surgery
- **Groups:**
  - With preoperative urine culture
  - Without preoperative urine culture
- **Outcome:** Postoperative UTI ≤6 weeks (positive culture >100,000 CFU + symptoms).
- **Additional:** Postoperative complications within 30 days (vaginal cuff hematoma, readmission, surgical site infection) and risk factors analyzed.

Results

- **150** patients were included
- **65%** were screened for ASB.



- Pre-op ASB: **12** patients.
- Post-op UTI: **14** patients.
- Post-op UTI rates by screening group (p=0.38)



- Post-op complications: similar in both groups
- Sub-analysis (ASB vs negative culture): no difference.

Interpretation

- No reduction in UTI or complications
- No benefit in ASB-positive subgroup
- Selective screening may avoid unnecessary antibiotics.

Conclusions

- **Routine preoperative screening and treatment** for ASB **did not** reduce postoperative UTI or complication rates.
- Findings suggest **no need** for routine screening and treatment of ASB before reconstructive pelvic organ surgery.
- Further prospective studies are required.

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