

ENDOLUMINAL TREATMENT OF URETERIC VAGINAL FISTULAE - A CASE REPORT

Introduction

Ureterovaginal fistulas are rare but relatively frequent complication of pelvic surgery. Abdominal hysterectomy is responsible the most for the ureteral injuries. In the past most ureterovaginal fistulas have been repaired by ureteroneocystostomy or end-to-end anastomosis. Now endourological techniques with D-J or M-J implantations are successful in treating ureterovaginal fistulas and ureteral stricture does not appear to be a common complication.

Design

We report a case of 61-years-old woman who, during the late postoperative period of a total laparoscopic hysterectomy, presented with incontinence with episodic flank pain, recurrent UTI compatible with Uretero-Vaginal fistula in the left side. This was initially treated with JJ-stent and Folly-catheter for one month with neither improvement of the symptoms nor closure of the fistula. As an alternative therapy we replaced the JJ-stent with an Polymeric Stent (Allium®).

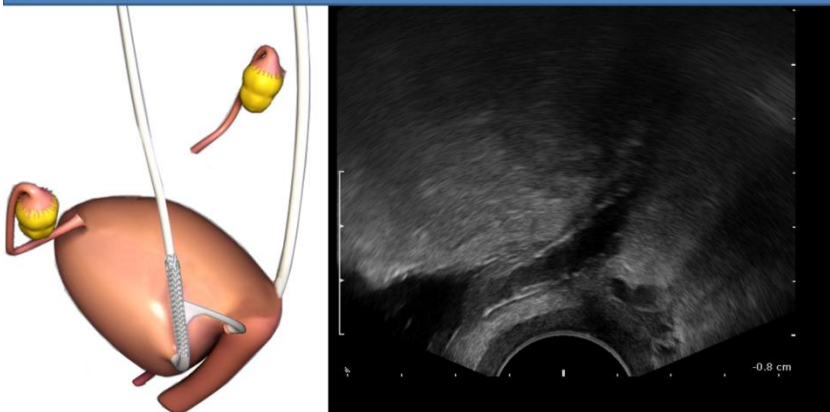
Results

One month after the intervention the patient dose not report any incontinence during the day or the night. The flank pain has disappeared completely. An intravenous urography showed a spontaneous healing and resolution of the uretero-vaginal fistula. The polymeric stent was then explanted, and the patient was then catheter and free of sympoms.

Conclusion

Patients, who have failed the endourological treatment with JJ or MJ stents, have The option be treated with polymeric stents. In our case, the polymeric stent did not only guarantee normal urine flow, but also maintained steady pressure over the fistula, which lead to tissue ingrowth and increased healing process. No open surgical procedure was needed for the closure of the uretero-vaginal fistula. Border studies are needed to evaluate the treatment of uretero-vaginal fistulas with polymeric stents.

Ultrasound follow up shows the position of polymeric stent in ureter and contineous closure of the fistula.



References

1. Ureteric Fistula

Disclosures

Funding: Nothing **Clinical Trial:** Yes **Public Registry:** No **RCT:** No **Subjects:** HUMAN **Ethics Committee:** Charité Berlin **Helsinki:** Yes **Informed Consent:** Yes