UROLOGICAL INTERVENTIONS WITHOUT ANAESTHESIA IN SPINAL CORD INJURED PATIENTS

Hypothesis / aims of study
Urological complications due to bladder or urethral pathology were shown in upper spinal cord injured patients. In these patients, below of the lesion pain sensation is generally absent due to loss of sensation. Nevertheless, autonomic dysreflexia may occur in t6 and above injured patients while performing urological interventions. In this study we try to show that if interventions without anaesthesia have effect on frequency of autonomic dysreflexia or not.

Study design, materials and methods
Between May 2007 and January 2013 97 patients which have urethral stricture in 13, bladder stone in 27, Botox TYPE A injection in 15 and vescostomy in 1 anterior external urethroplasty in 1, and cystoscopy 40 patients requiring small urological operation were performed interventions without anaesthesia. All the operations were was made in operating room without anaesthesia but with monitoring the patients.

Results
Autonomic dysreflexia was developed in only 1 patient who have bladder stone, and improved with intervention by anaesthetist. Otherwise no therapeutic intervention was required.

Interpretation of results
Patients requiring urological intervention with spinal cord injury due to urological complications, intervention without anaesthesia is reliable but rarely autonomic dysreflexia may develop.

Concluding message
Patients requiring urological intervention with spinal cord injury due to urological complications, intervention without anaesthesia is reliable but rarely autonomic dysreflexia may develop. Careful monitoring is required but anaesthesia is not necessary.

Disclosures
Funding: no Clinical Trial: Yes Public Registry: No RCT: Yes Subjects: HUMAN Ethics Committee: gulhane deneyisel arastirmalar merkezi etik komitesi Helsinki: Yes Informed Consent: Yes