534

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TRANSURETHRAL REMOVAL OF MALFUNCTIONING URETHRAL FOLEY CATHETER WITH HOLMIUM LASER

Introduction

Removal of a urethral catheter can be difficult in some special circumstances. In this case we used holmium laser to remove "malfunctioning" Foley catheter which couldn't be deballooned with syringe or cutting the tip of Foley catheter.

Design

72 years old female patient had Foley catheter for 35days because of femur neck fracture, Rt. and underwent bipolar hemiarthroplasty. Removing Foley catheter was failed at post operation day 23. Deballooning was not made with syringe and cutting the shift side of Foley catheter. Abdomen X-ray (KUB) and pre-enhanced computed tomography was done to check external encrustation of the catheter. Radiologic test showed no calcification on Foley catheter. Patient was send to operation room performing to rupture balloon of Foley catheter accessing holmium laser (Energy0.8J rate15Hz/VersaPulse® PowerSuite 100W) with 6Fr. ureteroscopic approach.

Results

Total operation time was two minute with lithotomy position without any complication. Using Holmium laser to rupture balloon was well performed. Removed Foley catheter showed nothing singularity such as calcification or malfunctioning of the inflation valve. Self voiding was done after three hours.

Conclusion

Using holmium laser through the ureteroscopy to rupture the balloon of urethral Foley catheter is safe, simple and effective to remove "malfunctioning" Foley catheter.

References

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