

URETEROSCOPIC URETERAL STENTING OF URETEROVAGINAL FISTULA FROM ROBOTIC AND LAPAROSCOPIC GYNECOLOGICAL OPERATIONS

Hypothesis / aims of study

Iatrogenic ureteral injuries are among the most serious complications in gynecologic surgery. With the increasing popularity of laparoscopic and robotic gynecologic surgery, the incidence of ureteral injuries is on the rise. This study was aimed at evaluating the minimal invasive approach and endourological techniques in female patients with iatrogenic ureterovaginal fistula.

Study design, materials and methods

We enrolled twelve patients (mean age: 60.9 years, range: 48-69) who were managed with retrograde stenting using ureteroscopy for ureterovaginal fistula. The diagnosis based on clinical presentation, double dye test, cystoscopy and excretory urography. The preoperative characteristics and the intraoperative and postoperative data were assessed by reviewing the operative notes, medical records and office notes.

Results

Between July 2012 and October 2014, twelve women underwent ureteroscopic ureteral stenting. The mean (range) interval between surgery and the diagnosis of presence of incontinence was 21.4 (10-65) days. Retrograde stenting was possible in all patients, using a 8Fr semi-rigid ureteroscope. Eleven patients became continent the day after surgery. One had urinary incontinence 2 weeks after surgery, which injured site was ureterovesical junction. Three patients had ureteral stricture that urography at 4 weeks after stent removal showed. All of them cured after transurethral balloon dilation.

Interpretation of results

The majority of ureterovaginal fistula can be successfully managed by ureteroscopic stenting..

Concluding message

Our study also suggests that an attempt of ureteroscopic stenting should be considered in all patients with ureterovaginal fistula before subjecting them to other modalities.

Disclosures

Funding: NONE **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** PNUH-IRB **Helsinki:** Yes **Informed Consent:** Yes