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# 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 2010 and January 2015 197 patients which have urethral stricture in 23, bladder stone in 47, Botox TYPE A injection in 25 and vesicostomy in 1 anterior external urethroplasty in 1, 1 and cystoscopy 99 patients requiring small urological operation were performed interventions without anaesthesia. All the operations were made in operating room without anaesthesia but with monitoring the patients.

#### Results:

Autonomic dysreflexia was developed in only 4 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**

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