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URINARY INCONTINENCE AFTER ANASTMOTIC URETHROPLASTY IN ADULT MALES AND POTENTIAL TREATMENT

Hypothesis / aims of study

This is a cohort retrospective study evaluating the incidence of urinary incontinence following anastmotic urethroplasty for traumatic posterior urethral strictures in adult males.

Study design, materials and methods

One hundred and four patients with history of pelvic trauma and diagnosed with posterior urethral stricture and operated upon with perineal anastmotic urethroplasty. Urethral strictures either de novo or recurrent following previous management were included in the study. Minimum 6 month follow up was available. Eighty two patients had stricture post road traffic accident (78.9%), 8 after falling astride (7.7%), 7 falling from height (6.7%), and 7 following blunt pelvic trauma (6.9%).

Results

Mean age of the patients at time of anastmotic urethroplasty was 30.85 years (Range 18 - 71 years) which was carried out 26 months (range 3 - 276 months) after trauma. Eight patients presented initially with difficulty and obstructive LUTS (7.7% of patients), one patient with indwelling urethral catheter (0.96%), and 95 patients with indwelling suprapubic catheter (91.4%% of patients).

Interpretation of results

Redo-anastmotic urethroplasty was done in 16 patients (15.39%) following previous urethroplasty procedures, 11 anastmotic procedures (10.58%) were carried out for recurrent strictures following DVIU, and 77 delayed anastomotic procedures were carried out after initial urinary diversion following initial trauma (74.04%).

Two patients (1.9%) suffered urinary incontinence and were maintained on external collecting device (condom) following anastmotic urethroplasty with patent urethra. Both were managed by Bulbo-Urethral Sling (BUS); one of them is totally continent after the sling procedure while the other had partial improvement of one hour pad test from 150gm to 30gm.

Concluding message

Post traumatic incontinence following anastmostic perineal urethroplasty is a rare condition in a cohort of patients with of heterogeneous etiology. Bulbo-urethral sling appears to be a safe and effective treatment option for urinary incontinence after anastmotic urethroplasty.

Disclosures

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