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Title (type in  
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LETTERS)**INTRAOPERATIVE CYSTOSCOPY FOR DETECTION OF URINARY TRACT  
INJURIES (Video demonstration: VHS, 14:30)**

**AIMS OF STUDY:** Lower urinary tract injury has been estimated to occur at approximately one out of every one hundred major gynecologic operations and cesarean sections [1]. Intraoperative recognition of such injuries is crucial to a good outcome. The objective of this video is to demonstrate in detail simple cystoscopic techniques that can be used transvaginally or transabdominally to establish bladder integrity and ureteral patency before completion of a patient's intended operation.

**METHODS:** Retrograde bladder filling and intravenous injection of indigo carmine, along with the use of a high intensity light source, fiber optic light cord, and endoscope placed transurethrally or through the extraperitoneal dome of the bladder, was performed with 334 consecutive patients undergoing incontinence and prolapse procedures over a seven year period.

**RESULTS:** Occult lower urinary tract injuries were discovered in 1.5 percent of cases. These two ureteral and three bladder injuries were managed under the same anesthesia with no long term sequelae to the patients. This occult injury rate is comparable to that previously reported in the peer review literature [2,3].

**CONCLUSIONS:** Simple cystoscopic techniques performed with minimal readily available equipment can be used intraoperatively, transvaginally or transabdominally, to establish bladder integrity and ureteral patency before a patient leaves the operating room.

**REFERENCES:**

1. ACOG Technical Bulletin. Number 238, 1997.
2. Obstet Gynecol 1994;84:318-20.
3. J Pelvic Surg 1996;2:310-3.