

**347**

Grise p. <sup>1</sup>, Egon G. <sup>2</sup>, Group G. <sup>3</sup>

1. CHU, France, 2. L'arche Le Mans, 3. Study

## **CONTINENT URINARY DIVERSION FOR NEUROGENIC BLADDER**

### **Aims of Study**

Incontinent neurogenic patients who are refractory to conservative management, and urethral permanent or intermittent catheterization, may benefit from continent urinary diversion as an alternative to conduit.

### **Methods**

42 patients (15 M., 27 F.), from 9 to 67 years (mean 38), had neurogenic bladder (medullar trauma: 24 out of them 16 quadiplegic, congenital spinal lesion: 11, other: 7). They underwent continent urinary diversion (CUD) created from appendix(13), ileum with a valve(16), tubularized ileum(2), bladder tube(5), ureter(3), urethra(2). Reservoir were bladder(11), or augmented bladder(13) or neobladder(18).

### **Results**

With a mean follow-up of 4 years (14.1 to 0.4), 30 patients had a complete continence and easy catheterization, 8 had some leakage or difficulties to catheterize, 4 failures were treated by permanent diversion or catheterization. Best results were from appendix and ileum, and poor results from bladder and urethral tube. Renal function were normal in 39 cases before CUD and 38 after, upper urinary tract were non dilated in 36 cases before and 33 after. No major complication were observed. It may be proposed to patients in wheelchairs who accept the discipline of intermittent catheterization, specially to women who experienced difficulties to transfert to toilet or difficult acces to urethral meatus, or to men with urethral injuries. Rehabilitation surgery to obtain a grasp and a key-grip for self-catheterization can be associated in selected cases. The choice for an appendix or ileum segment have to be discussed when taking into account intestine status and patient demand for a positive body image.

### **Conclusions**

CUD is a valuable option to an ileal conduit in neurogenic patients, even in quadriplegics, that has to be explained to patient as a possible choice.