Amaro J L ¹, Takegawa B ¹, Kawano P R ¹, Amorim A ¹, Yomamoto H ¹, Trindade Filho J C ¹
1. Faculdade de Medicina - Universidade Estadual Paulista - UNESP - Brasil

POSTERIOR SAGITAL TRANSANORECTAL APPROACH IN THE MANAGEMENT OF NA EXTENSIVE POSTERIOR URETHRAL STENOSIS IN THE PEDIATRIC AGE GROUP.

Synopsis of Video

The lower urinary tract blunt trauma associated with pelvic fractures has increased due to higher incidence of automobile accidents. Posterior Urethral distraction injuries are a disturbingly common sequela of pelvic fracture, occurring in 4% to 14%. In most patients the perineal approach will be successful, but there are cases with severe injuries with very long distraction or marked displacement of the prostate, that will require a different access. One option is the posterior sagital transrectal approach associated with a tubular prepuce flap, that provide a better urethral exposure than the perineal or the transpubic approach, without the necessity of a pubectomy.

In this video, we present a case of a four-year-old boy with an extensive posterior urethral stenosis due to a hip fracture that was corrected using the posterior transrectal approach. Initially we performed a colostomy. Then, oriented by a muscle electrical stimulator a midline incision through the rectum and perineum was opened in layers to avoid fecal incontinence. The anterior rectal wall was opened and the bladder and the stenosis area was identified. A preputial flap was dissected and a neo-urethra was confectioned over a 10 Fr folley catheter with a 6-0 poliglactiline running suture. The neo-urethra was anastomosed between the healthy bulbous urethra and the vesical neck using interrupted suture with 4-0 chromic catgut. A deepithelized flap was interposed between the rectum and the anastomosis area. There were no post-operative complications. The colostomy was closed one month after surgery and a retrograde vesicourethrogram showed a pervious urethra. Partial urinary continence and fecal continence were present 1 month after surgery.

In cases of extensive posterior urethral stenosis in children, this surgical approach can be a feasible option to obtain a good access to a so restricted area.