248

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CORRELATION BETWEEN CATHETERIZATION AND TRANSABDOMINAL USG FOR ESTIMATING THE BLADDER VOLUME AND POST-VOID RESIDUAL VOLUME IN POST-PARTUM PATIENTS

Hypothesis / aims of study

The most common method for measuring bladder volume in post-partum patients is catheterization, which frequently may cause urinary tract infection. The other non-invasive method includes ultrasonograph (USG) examination which may reduce the risk of infection and trauma. The aim of this study was to recognize the correlation between catheterization and trans-abdominal USG in estimating bladder volume and post-void residual volume. In addition, it was also aimed to determine diagnostic value of trans-abdominal USG for diagnosis of urinary retention.

Study design, materials and methods

This study was an analytic-observational study with cross-sectional design conducted in 90 post-partum patients on day 1, 2 and 3 following their vaginal delivery at The Anggrek Clinic, Fetomaternal Subdivision and Emergency Unit, 3rd Floor, RSCM since October 2003 – August 2004.

Measurements of bladder volume and post-void residual volume were performed by trans-abdominal USG, which was further compared to catheterization measurement. Both measurements were subsequently tested on three kinds of USG formula (1st, 2nd and 3rd formula). Trans-abdominal USG was also considered for diagnosing urinary retention.

Results

By measuring the bladder volume, we found a strong correlation between the 1st, 2nd, 3rd USG formula and catheterization with R of 0.84, 0.87, and 0.80 respectively. By measuring the post-void residual volume, we also found a strong correlation between the 1st, 2nd, 3rd USG formula and catheterization with R of 0.85, 0.87 and 0.85 respectively. However, there was only the 2nd USG formula (Koelbl formula) which indicated no significant difference of bladder measurement compared to catheterization. Hence, it may be considered in establishing the diagnosis of urinary retention and indicated 87% sensitivity, 95.5% specificity, 87% of PPV (Positive Predicted Value), and 96% NPV (Negative Predicted Value).

Interpretation of results

Trans-abdominal ultrasonograph measurement of bladder volume and post-void residual volume is strongly correlated to catheterization procedure.

Concluding message

The trans-abdominal USG could be considered as an alternative method other than catheterization, which may reduce adverse effects such as infection and trauma due to invasive catheterization.

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What were the subjects in the study?	HUMAN
Was this study approved by an ethics committee?	Yes
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Was the Declaration of Helsinki followed?	Yes
Was informed consent obtained from the patients?	Yes