

LAPAROSCOPICALLY ASSISTED VAGINAL REPAIR OF VESICO-VAGINAL FISTULA INITIAL CLINICAL REPORT

Introduction

Many approaches have been described to repair vesico-vaginal fistulae (VVF), either open abdominal surgeries, vaginal techniques or laparoscopic approaches. Vaginal repairing techniques are minimally invasive, but there are some limitations for higher located fistulous tracts, as well as for the interposition of appropriated flaps in this cases. We describe a combined technique of vaginal repair, assisted by laparoscopy, in order to get additional advantages to the minimally invasive procedure.

Design

Two cases of post-hysterectomy VVF were included. Their mean age was 41 years. Other parameters like body mass index (BMI), time from hysterectomy to fistula repair and other associated injuries were comparable.

Technique: Two simultaneous surgical teams: vaginal and laparoscopic, performed the procedure in four surgical steps, as follows: 1) *Initial Vaginal Time:* ureteral and fistulous tract stent placement, vaginal dissection of the fistulous hole and its tract. 2) *Initial Laparoscopic Time:* 3-port transperitoneal approach, lysis of intraabdominal adhesions, omental flap confection. 3) *Final Vaginal Time:* bladder closure in two layers, omental flap passage and fixation, vaginal closure. 4) *Final Laparoscopic Time:* Suture fixation of the omental flap to the parietal peritoneum.

Results

The mean operation room (OR) time was 150 min. The blood loss was less than 100ml. No intraoperative complications were registered. And the follow-up was 6 months without any complication.

Concluding message

Laparoscopically assisted vaginal repair of VVF gives several advantages:

The continuous intraperitoneal visualization of every step of the procedure allows a more controlled vaginal repair, avoiding any visceral injury with more comfort and safe sensation for the vaginal surgeon. There is a better omental flap interposition with the possibility of secure-tying it, and no special laparoscopic skills are needed to perform this approach.

<i>Specify source of funding or grant</i>	NONE
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	No
<i>This study did not require ethics committee approval because</i>	This study is an Initial report with a combined two techniques with prior reports, and informed consent was obtained prior to the surgery in all cases
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes