To discuss general plastic surgical principles of repair for complex urogenital fistulas.

Prospective Study. Twenty complex urogenital fistulas were repaired using the general principles of a) adequate pre-operative preparations, b) detailed counseling and consent, c) plastic surgical principles of tissue handling & tissue dissections, d) circum-incision & circum-dissection of the complex fistulas, e) closure of bladder and the vagina separately in two layers at right angle to each other using polyglactin 910 suture on round bodied needle, f) segregation of the suture lines using interposition flaps, g) wide bore drainage of the cavities, h) vigilant post-operative care, especially adequate hydration, i) strict compliance of the post operative & follow up instructions and , j) total hysterectomy, augmentation cystoplasty, ureteric re-implantation, colpo-cystoplasty as per the requirements .(1-3)

Eighteen complex fistulas had successful out come and who recurrences were closed successfully after an interval of 6 months. All were continent at early and late follow-ups.

Wide circum-dissection of the fistulas, tensionless right angle closure of bladder and vagina, and re-enforcing the repair with interposition or interposition & on lay flaps are key steps for successful out come of urogenital fistulas.

Strict adherence to the plastic surgical principles of tissue handling, dissection, and further re-strengthening of the repair are mandatory maneuvers for the success of this worst complication following any obstetrical or gynecological procedure/ problem.


Specify source of funding or grant  
Nil
Is this a clinical trial?  
No
What were the subjects in the study?  
HUMAN
Was this study approved by an ethics committee?  
No
This study did not require ethics committee approval because  
nothing new was tried.
Was the Declaration of Helsinki followed?  
Yes
Was informed consent obtained from the patients?  
Yes