

Modern urogenital fistula, a comparison of data from the two countries

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Introduction

The problem of urogenital fistula remains one of the most pressing in modern urology. Previously, the most common cause of urogenital fistula was obstetric injury. However, in recent years, surgical and post-radiation fistulas of the urogenital organs have prevailed in developed countries, while obstetric trauma remains the main cause in developing countries. Of great interest is the analysis of the etiological structure of urogenital fistulas at the present time. It also raises the question of the frequency and cause of the formation of certain types of fistula in different regions. In addition, of particular interest is the analysis of complications arising after fistuloplasty.

Results

Over the 6-year period, 254 women came to our clinic (hereinafter referred to as the first region / clinic) with the problem of urogenital fistulas, in one of the clinics of another country (hereinafter - the second region / clinic) there were 107 patients in the same period. An analysis of the data obtained revealed that the most frequent cause of fistula formation in the first region is surgery (40.5%) and the effects of previous radiation therapy (26.4%), while in the second clinic iatrogenic injury remains the main cause open surgery (85%). Preferred techniques of fistula closure are also different, in the second region transvesical fistuloplasty was performed in 71.9% of cases, and transvaginal fistuloplasty was performed in 77.7% in the first region. The average age of women was 48.85. (Table 1).

Methodology

We performed a prospective cross-sectional analysis among women with urogenital fistulas who applied to two clinics in different countries. For this purpose, women were selected through the electronic search system who applied to the clinic from 2012 to 2018. Their case histories were analyzed, and information about the results after the operation was collected through telephone calls or repeated examinations at the clinic.

Conclusions

Based on the data obtained, the prevalence of various types of fistula in two countries was revealed. Our analysis has certain limitations. Despite this, our findings suggest a different etiology, epidemiology and surgical treatment techniques in patients with urogenital fistulas. After analyzing all the characteristics, we made conclusions on the basis of which it is possible to influence the frequency of fistulas.

Table 1

