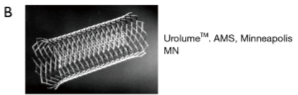
Urethral Stent

UROLUME

**Item Number:**

**Minimal invasive management for the relief of LUTS (lower urinary tract symptoms) or Urinary Retention caused by an Urethral Stricture**



Why is it done?

 This procedure is performed when concentric scarring in the urethra causes LUTS and /or Urinary Retention

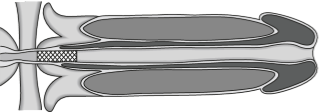
 Symptoms include: a weak stream, nightly urination, frequent urination, inability to urinate, **(LUTS)** and Urinary Retention

 This is alternative to an invasive procedure where long periods of anaesthetic is contra-indicated.

 Usually for chronically sick patients who cannot undergo surgery, yet are active enough not to want a permanent catheter.

 Patients who don’t want to / cannot do intermittent self-dilatation of these strictures

 Don’t want a permanent Indwelling Catheter



How is it done?

 Patients will receive a sedation with local anaesthetic gel placed in the urethra.

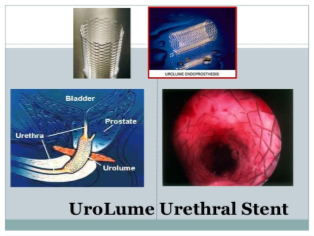
 A cystoscopy is performed by placing a camera in the urethra with the help of a lubricant jelly and an irrigant (fluid).

 The measurements of the urethral is taken (length)

 Appropriate length coil is chosen.

 The device is placed through the cystoscopic sheath, to sit snug in the prostate urethra stretching over the length of the stricture

 Prophylactic antibiotics will be given to prevent any infections.

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Complications

**Side–effects**

 Persistent pain in penile shaft

 Pain in Perineum when seated

 Migration of the device

 Erosion of device

 Possible infection

 Long term yields the risk for encrustation and recurrent infections

 NB! Each person is unique and for this reason symptoms vary!

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