Flexible Cystoscopy& Removal Stent

**Item Number:** 36833

A day procedure under local anaesthetic, where a flexible cystoscope is placed in the bladder via the urethra to remove a stent placed with previous upper tract work

Why is it done?

To investigate:

 Haematuria (blood in the urine)

 Recurrent urinary tract infections

 Space occupying lesions in the kidneys, ureters and bladder investigated with ureteroscopy

 Abnormal cells suggestive of urothelial carcinoma, on urine cytology

 Removal of stent

**Risk factors:**

 Strong family history of bladder cancer

 Smokers or passive smokers

 Factory workers: dyes, paints, etc

 Renal stone disease, bladder stones with recent surgery resulting placement of stent

How is it done?



 A cystoscopy is performed by placing a camera in the urethra with the help of a lubricant jelly and saline

 The bladder is then distended using the fluid

 The inside of the bladder is viewed for pathology.

 If any suspicious lesions are seen, a biopsy will be taken.

 Urine would have been sent for cytology prior to the procedure, to rule out the existence of cancer.

 Antibiotics may be given to prevent infection.



Complications

### **What to expect after the procedure?**

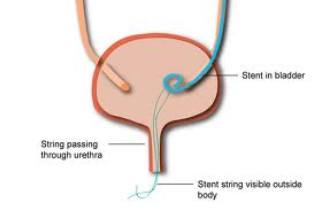
 Pain on initial passing of urine

 Bladder infection ranging from a burning sensation to, fever, to puss (rare)

 Blood stained urine

 Lower abdominal discomfort which will persist for a few days

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



### Indications for a Ureteric stent

 Hematuria from upper tracts

 Disobstruction of the ureter caused either calculus, blood clot or tumour

 External compression of the ureter by retro-peritoneal pathology ie: Fibrosis, retroperitoneal lymphnode compression

 Reduced renal function associated with hydronephrosis

 Sepsis associated with hydronephrosis

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