Exision of Urethral Caruncle

Prolapsed Urethral Mucosa

**Item Number:**

Why is it done?

 Prolapsed urethral mucosa causing pain and bleeding

 Occurs from childhood to old age

  

How is it done?

 This procedure is done under a spinal / general anaesthetic, as decided by the anaesthetist.

 The legs will be elevated into the lithotomy position. (stirrups)

 This procedure is done with cystoscopy.

 Your bladder and urethra is inspected with cystoscopy

 The prolapsed mucosa will then be excised at the external meatus.

 Dissolvable sutures will be placed for hemostasis

 A catheter will be placed until you are awake for some compression.

 Prophylactic antibiotics will be given to prevent infection.

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Complications

**Side–effects**

 Any anaesthetic has its risks and the anaesthetist will explain all such risks.

 Complications: hemorrhaging, and urine retention

 Patients catheter will be removed the next morning.

 If you cannot urinate after 2-3 attempts, a catheter may be inserted to empty your bladder.

 You may be required to keep the catheter for a few days if you have persistent bleeding or urinary retention.

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

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