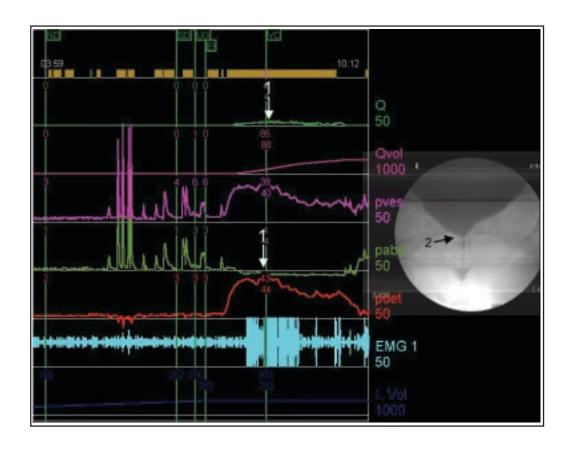
Female Bladder Outlet Obstruction following a Transvaginal Tape Procedure with Cystocele

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BRIEF HISTORY

This 57 years old female had undergone transvaginal tape (TVT) for her stress urinary incontinence about 9 years ago. She had received tape release 4 years later due to voiding difficulties. Since these operations, she suffered from frequency, dysuria and some degree of urinary incontinence.

CLINICAL INVESTIGATION

Urinalysis indicated pyuria and microscopic hematuria. A physical examination noted grade 2 cystocele. An ulatrasound examination revealed bilateral kidney pelviectasis with moderate post voiding residual urine.

VIDEOURODYNAMIC FINDING

A videourodynamic study (VUDS) was arranged to exclude the possibility of bladder outlet obstruction or bladder dysfunction. The

bladder capacity was 285 cc and she experienced a strong urge sensation. The Pdet was 44 cm of water and the maximum flow rate (Qmax) was 4 mL/s (arrows 1). Voiding cystourethrography showed poor bladder neck opening and funneling (arrow 2). The residual urine was 72 cc. Based on this, grade 2 cystocele without obvious stress urinary incontinence was impressed.

CLINICAL DIAGNOSIS AND MANAGEMENT

This is a case of female bladder neck outlet obstruction with a hypersensitive bladder. Moreover, pelvic organ prolapse with occult urinary incontinence was impressed. The patient was reluctant to undergo surgical intervention and therefore she was treated with an alpha blocker in order to relieve her symptoms.

DISCUSSION

Female bladder outlet obstruction (BOO) is the product of functional or anatomical abnormalities. BOO is defined by International

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Continence Society (ICS) as a generic term for obstruction during voiding that is characterized by increased detrusor pressure and a reduced urine flow rate [1]. In addition to the patient's medical and surgery history, a pelvic examination combined with an accurate neurological investigation is important. An urodynamic study or a cystoscopy examination is also a choice option. VUDS remains the most helpful diagnostic tool for female BOO [1]. Currently, the most accepted urodynamic measurement values for female BOO dictate a Pdet of at least 25 cmH₂O in combination with a Qmax up to 12 mL/s [2]. Kuo has reported on the various types of VUDS and their characteristics among females with BOO [3]. Specific treatments can be given that will produce acceptable results if the underlying disease is accurately diagnosed.

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- Kuo HC: Videourodynamic characteristics and lower urinary tract symptoms of female bladder outlet obstruction. Urology 2005; 66: 1005-1009.

TUGA 婦女泌尿學研討會								
日期:2010年6月20日(星期日) 地點:彰化基督教醫院11樓連瑪玉學術講堂 地址:彰化市南校街135號				諮詢專線:02-21002440 台灣婦女泌尿暨骨盆醫學會祕書處 E-mail: tuga@tuga.org.tw				
時	間	課程	講師	時	間	課程	講師	
08:00-08:20		Registration	孫茂勝 梁景忠	11:50-	12:00	Discussion		
08:20-08:30		Opening Remarks	茶鴻德	12:00-	13:30	Lunch		
Section (I) Pelvic Floor and LUTS					Section (III) Overactive Bladder			
座	長	蘇聰賢、洪滿榮		座	長	盧佳序、王有利	盧佳序、王有利	
08:30-	08:50	Pelvic floor anatomy and female lower urinary tract dysfunction	陳進典	13:30-	13:50	Overactive bladder on update of definition and pathophysiology	洪滿榮	
08:50-	09:10	Clinical assessment of lower urinary tract symptoms in women	龍震宇	13:50-	14:10	Current trend in drug therapy for OAB	黃文貞	
09:10-	09:30	Urodynamic study in lower urinary tract dysfunction	楊振銘	14:10-14:30	Assessment of OAB—symptom score and urodynamics	林姿吟		
09:30-	09:50	Medical treatment and physiotherapy for lower urinary tract dysfunction	陳慧毅	14.10-14.30		1017X 7		
09:50-	09:50-10:00 Discussion			14:30-	14:40	Discussion		
10:00-10:30		Coffee Break		14:40-	15:00	Coffee Break		
Section (II) Urinary Incontinence and Voiding Dysfunction					Section (IV) Urinary Incontinence & Pelvic Organ Prolapse			
座	長	梁景忠、張進寶		座	長	余堅忍、梁守蓉		
10:30-	10:50	Integrative Continence and Voiding dysfunction Center-The Changhua Christian Hospital experience	孫茂榮	15:00-	15:20	Current trend in anti-incontinence surgery	孫茂榮	
10:50-	11.10	Recent advance in management of the neurogenic	陳俊吉	15:20-	15:40	Current trend in pelvic reconstructive surgery	黃寬慧	
		voiding dysfunction		15:40-	16:00	Prevention and management of complications of urogynecology surgery	盧佳序	
11:10-	-11:30 -11:50	Voiding dysfunction in chronic spinal cord injury Peripheral neuropathy and Diabetic cystopathy	黄乃炯 王舒儀	16:00-	16:10	Discussion		
11:30-				16:10-	16:20	Closing Remarks	陳慧毅	