



Apresentação de caso

Nelson Batezini

Março de 2012



ISAD, 36a,f

Incontinência Urinária insensível há 1 ano, 2 semanas após cirurgia de retirada de tumor pélvico. Sem outras queixas.

Uso de 6-8 fraldas/dia

HPP:

Cirurgia de retirada de tumor pélvico há 1 ano.

Ao exame:

Obesidade

Incisão mediana supra umbilical até o púbis

Colostomia



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Salpingo-histero-ooforectomia

Apendicectomia

Enterectomia

Colectomia

Cistectomia parcial

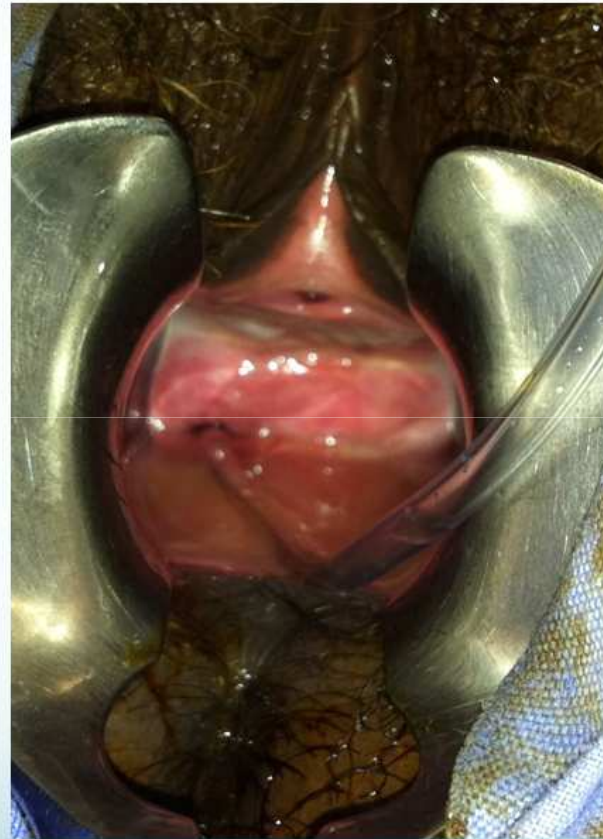
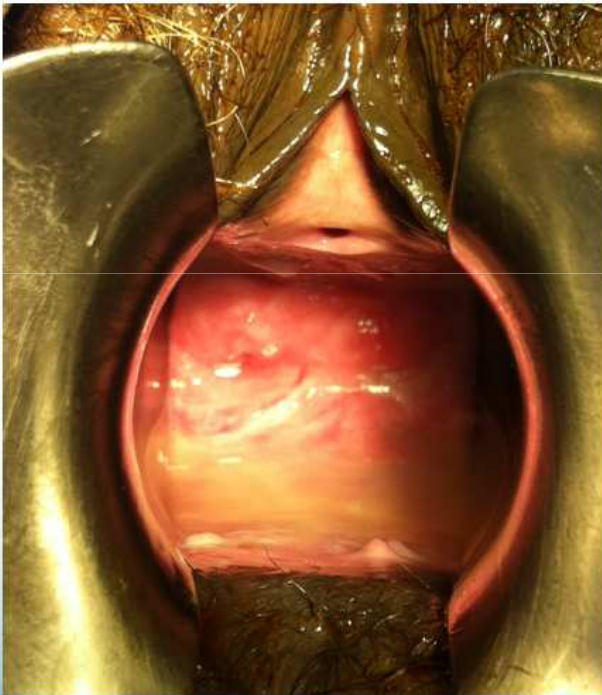
Janeiro de 2011

AP: endometriose



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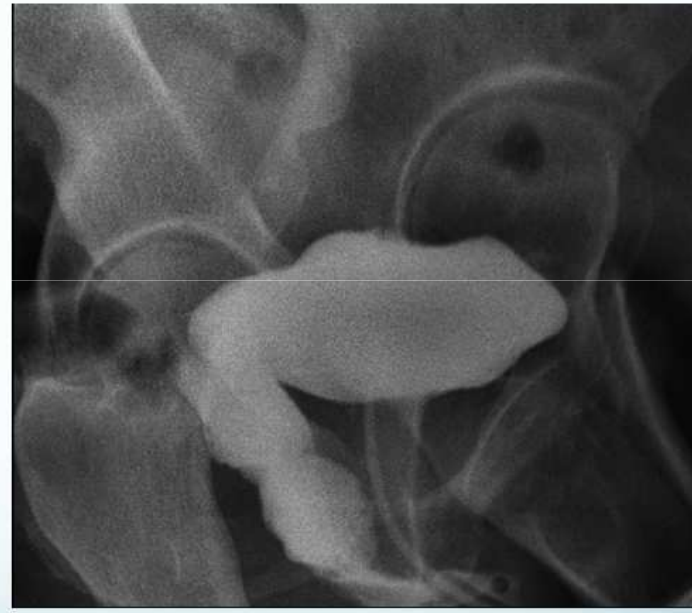
Cistoscopia:

Presença de fístula supra-trigonal a direita.
Re –implante ureteral a direita.



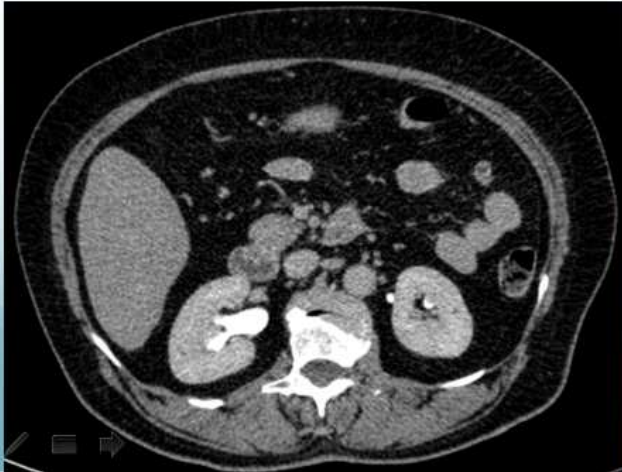
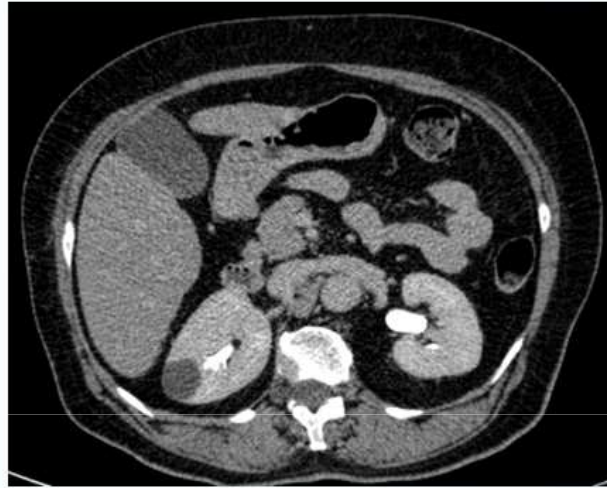
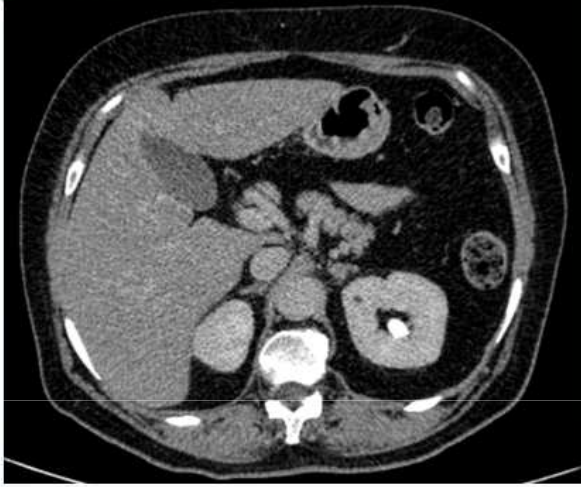
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Conduta?

Fistulas Pequenas – SVD + Fulguração
- Cola biológica

FVV Supra trigonal – Via abdominal
Infra Trigonal – Via vaginal

Laparoscopia
Robótica



BJUI Urogenital fistula in the UK: a personal case series managed over 25 years

BJUI INTERNATIONAL

Paul Hilton

Newcastle upon Tyne Hospitals NHS Foundation Trust, Royal Victoria Infirmary, Newcastle upon Tyne, UK

Accepted for publication 5 August 2011

TABLE 4 Route and type of primary procedures undertaken

Primary procedure	N (%)
Abdominal procedures:	
Transperitoneal	44 (48.9) – 11 (25) included omental graft
Transperitoneal + ureteric re-implantation	7 (7.8)
Transvesical	16 (17.8)
Ureteric re-implantation	15 (16.7)
Urinary diversion	8 (8.9)
Subtotal	90 (30.9)
Vaginal procedures:	
Layer dissection	169 (84.1) – 38 (22) included Martius graft
Urethral reconstruction	15 (7.5)
Colpocleisis	16 (8.0)
Urethrocleisis and insertion of suprapubic catheter	1 (0.5)
Subtotal	201 (69.1)
Total	291 (100.0)

TABLE 5 Results of fistula repair procedures

Aetiology	Patients, n	Healed spontaneously, n (%)	No surgery – other reasons*, n (%)	Primary diversion, n (%)	Primary repair procedure, n (%)	Closed at first operation†, n (%)
Surgical	238	19 (8.0)	13 (5.5)	1 (0.5)	205 (86.1)	195 (96.1)
Obstetric	38	4 (10.5)	3 (7.9)	0	31 (81.6)	28 (90.3)
Radiation/malignant	36	0	11 (30.6)	6 (24.0)	19 (52.8)	18 (94.7)
Miscellaneous	36	1 (2.8)	6 (16.7)	1 (3.4)	28 (77.8)	26 (96.3)
Total	348	24 (6.9)	33 (9.5)	8 (2.7)	283 (81.3)	267 (95.4)

*no surgery – other reasons' includes patients referred for telephone advice only, those declining surgery, those dying before treatment or follow-up, and those awaiting treatment. †patients awaiting follow-up are excluded from the calculation of closure rate.



Laparoscopic Vesico-vaginal Fistula Repair *Our Experience and Review of the Literature*

*Francesco Porpiglia, MD, Cristian Fiori, MD, Ivano Morra, MD, Francesca Ragni, MD,
Davide Vaccino, MD, and Roberto Mario Scarpa, MD*

TABLE 2. Laparoscopic Repair of Vesico-vaginal Fistula: Review of Literature

Author (ref)	No. Patients	Operative Times (min)	Blood Losses (mL)	Hospital Stay (d)	Foley Duration (d)	Follow-up (mo)	Recurrence (%)
Wong et al ¹³	2	–	–	–	21	40	0
Chibber et al ¹⁴	8	220	–	3	14	3-40	0
Sotelo et al ¹⁵	15	170	–	3	10.4	26.2	7
Melanud et al ²³	1	280	50	2	14	1.5	0
Qu et al ²²	2	–	–	2-12	14-20	–	–
Nabi and Hernal ²⁴	1	190	–	4	21	–	–
Miklos et al ¹²	1	270	–	1	21	–	–
Nezhat et al ⁹	1	–	–	1	10	–	–
Nagraj et al ¹⁷	13	130	–	4.5	15	21	8
Phipps ¹⁰	2	160	–	1	10	–	–
Von Theobald et al ¹¹	1	70	100	8	7	6	–

Robotic Reconstruction for Recurrent Supratrigonal Vesicovaginal Fistulas

Ashok K. Hemal,* Surendra B. Kolla and Pankaj Wadhwa

From the All India Institute of Medical Sciences, New Delhi, India

7 casos

Fístulas supratrigonais ≤ 3 cm

3 dias de internação

Sonda 14 dias

100% sucesso



Do we need new surgical techniques to repair vesico-vaginal fistulas?

João Paulo Zambon • Nelson S. S. Batezini •
Eduardo R. S. Pinto • Milton Skaff • Marcia E. Girotti •
Fernando G. Almeida

Table 1 Patient's demographics according to repair approach

	Abdominal (n=6)	Vaginal (n=16)
Mean age (years)	51.3±4	46.2±7
Etiology		
Hysterectomy	3 (50%)	13 (81.25%)
Sling	0	1 (6.25%)
Vaginal delivery	1 (16.6%)	2 (12.50%)
Cesarean	1 (16.6%)	0
Radiotherapy	1 (16.6%)	0
Patients with previous surgical procedure failure	3 (50%)	6 (37.5%)
Mean time between fistula development and final treatment (months)	11.1±3	12.1±2

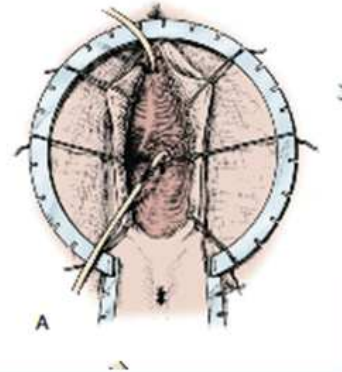


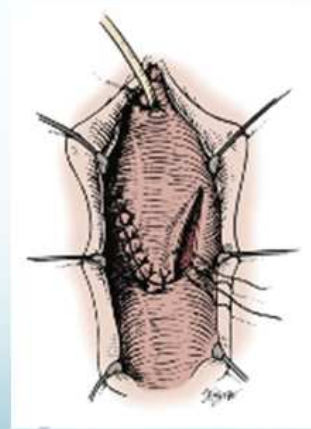
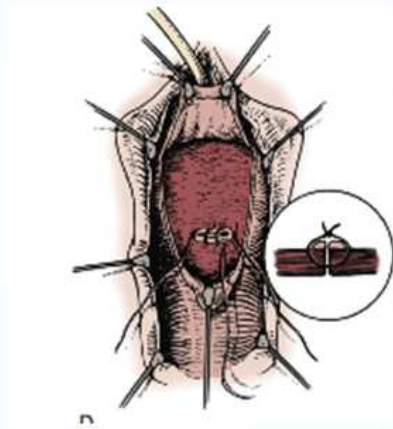
Table 2 Characteristics of the fistula and post-operative outcomes

	Abdominal (n=6)	Vaginal (n=16)
Mean size (cm)	2.5+/-0.6	3.2±0.5
Above the trigone	6 (100%)	13 (81.25%)
Hospital discharge (mean hours)	80.5±6	48±3 ←
Tissue interposition		
Peritoneum	2 (33.3%)	13 (81.25%)
Martius flap	00	3 (18.75%)
Omentum	4 (66.6%) ←	0
Ureteral re-implantation	2 (33.3%)	0
Ileal bladder augmentation	1 (radiotherapy; 16.6%)	0
Urgency	1 (16.6%)	2 (12.5%)
Dyspareunia	0	4 (25%)
Stress urinary incontinence	1(16.6%)	0
Success rate	100% ←	100% ←



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Paciente teve alta no 1º PO

SVD por 14 dias