

AB166. SOH22ABS185. latrogenic ureteral ligation during bladder injury repair following vaginal hysterectomy

Mohamed Zeid, Mamoun Abdelrahman, Subhasis Giri

Urology Department, University Hospital Limerick, Limerick, Ireland

Background: Hysterectomy is the most common gynecologic surgery in reproductive-aged women in the United States; approximately 600,000 are performed each year, the majority of which for benign indications. Lower urinary tract injury, including both bladder and ureteral injury, is a morbid complication of hysterectomy. The highest risk of intraoperative ureteral trauma is associated with hysterectomy, performed most frequently in postmenopausal women. The overall incidence of ureteral injuries varies in different studies between 0.5% and 10%.

Methods: We repeat case of 75-year-old with Right ureteric ligation following Hysterectomy complicated bladder injury repair. Ureteral ligation was not noticed during the operation, one week after the operation checking ultrasound due to raising creatinine showed right hydronephrosis. A computed tomography scan revealed dilation of the right renal pelvis and the upper two-thirds of the ureter. Contrast medium identified blind end ureter at the vesicoureteral junction.

Results: Subsequently, diagnostic cystoscopy revealed repaired area on the enter ureteric ridge, therefore, failed to identify the right ureteric orifice. Subsequently, she had right nephrostomy and failed antegrade right ureteric stenting, finally, right ureteric implantation was done.

Conclusions: This case report highlights the problem of unnoticed ureter injury during gynecological surgeries,

which, if ignored, can develop into serious complications. Suggested ways to prevent future recurrence of the problem, such as perioperative insertion of the ureteric stent with thread which can be tied to the foley catheter and this allows intraoperative ureteral trauma and urology consultation.

Keywords: Hysterectomy; perioperative insertion of the ureteric stent; intraoperative ureteral trauma; intraoperative ureteral trauma; bladder injury

Acknowledgments

Funding: None.

Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the noncommercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: https://creativecommons.org/licenses/by-nc-nd/4.0/.

doi: 10.21037/map-22-ab166

Cite this abstract as: Zeid M, Abdelrahman M, Giri S. AB166. SOH22ABS185. Iatrogenic ureteral ligation during bladder injury repair following vaginal hysterectomy. Mesentery Peritoneum 2022;6:AB166.