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Introduction & Objectives: Endoscopic treatment of congenital ureteroceles nowadays is a standard to relieve obstruction.

Materials & Methods: Our clinical material includes 7 neonates at the mean age of 18 days (range 14-27) which were admitted to the hospital because of the hydronephrosis and ureterocele revealed in prenatal diagnosis and incident of the urinary tract infections during the first days of life. Each patient was reassessed by ultrasound, which confirmed prenatal diagnosis. In order to remove the obstruction from the upper part of the kidney laser incision of ureterocele was performed. All patients were followed with voiding cystourethrogram and ultrasounds postoperatively.

Results: Median operative time was 25 minutes (range 20-35). There were no intraoperative complications or reoperative procedures required for any case. All patients with ureterocele demonstrated decompression of the ureterocele and improvement in hydroureteronephrosis at 6 months. There was no incidents of recurrent UTI.

Conclusions: Ho:YAG laser ablation appears to be safe, effective, and efficient for the treatment of the ureteroceles in the neonatal period. Early intervention allows for the resumption of the renal parenchyma, prevents infection of the urinary tract or can postpone the need of the final treatment.