FOREIGN BODIES IN THE LOWER URINARY TRACT — OUR INSTITUTIONAL EXPERIENCE

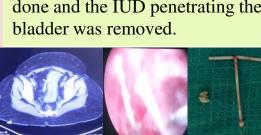
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Foreign body in the lower urinary tract is uncommon. We present three cases managed by endoscopic, open surgical methods.

Case 1:61 years old male with complaints of passing urine via rectum. He had inserted a big needle into urethra. Clinical examination and X ray revealed foreign body in perineum. Perineal exploration was done, foreign body pushed into the urethra from rectum and delivered via ventral

Case 2: 48 years old male with psychiatric illness presented with dysuria. He had inserted a small needle into urethra. Clinical examination was normal. X Ray showed foreign body in the perineum. Cystoscopy was done and foreign body pushed into bladder. It was wrapped around a gauze and removed.

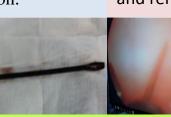
Case 3:48 years old female with complaints of suprapubic pain. She had Intrauterine device insertion 10 years back. CT showed IUD attached to bladder with calculus. Stone was found in posterosuperior aspect of bladder with the thread of IUD attached. Vesicolithotripsy was done. Stone fragments were evacuated. Open exploration was done and the IUD penetrating the bladder was removed.



Discussion: Foreign bodies in LUT cause recurrent urinary tract infections, hematuria, encrustation, stone disease, bladder perforation, pelvic abscess. Clinical examination and radiological investigations aid in diagnosis and management. Cystoscopy, use of nephroscope sheaths, holmium laser and pneumovesicoscopy are endoscopic methods. We tried endoscopic removal and resorted to open

approach when needed.









Conclusion: Minimally invasive procedures are usually successful. Open surgical procedures may be done if warranted.