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(1927) The Devastated Urethra in Neurogenic Lower Urinary Tract Dysfunction Patients: An Untold Story of Chronic Urethral Catheterization

Michael Kennelly, MD, FACS
Atrium Health
McKay Urology
Carolinas Medical Center
1023 Edgehill Road South
Charlotte NC 28207
Submitter; Presenter

Abstract Body

In addition to optimizing renal function, most urologists agree that the goals of neurogenic bladder management often prioritize quality of life. This manifests by reducing incontinence, limiting or eliminating risk of infection, and considering discretion and comfort when patients perform their daily routines. Indwelling catheters (IC) are the most common method in managing neurogenic lower urinary tract dysfunction (NLUTD), with 40% of males and 70% of females using IC as their primary management method. One often overlooked aspect of IC in the NLUTD patient is that of the devastated urethra. The long-term use of indwelling catheters in NLUTD patients can result in bladder spasms with leakage, chronic urethral dilation, and eventual destruction of the urethral closure mechanism. In the insensate patient, traction pressure on urethra can lead to erosion causing traumatic hypospadias posteriorly, or pressure necrosis erosion toward the pubic symphysis anteriorly. This talk seeks to elucidate the complications that arise from IC including the devastated urethra, discuss treatment options for mitigating the damage caused by long term usage of IC's and identify the need for close monitoring of patients with IC in order to prevent urethral damage.

Treatment options for the devastated urethra in NGLUTD patients are limited due to several compounding factors such as poor nutritional status of the patient population, medical comorbidities, and decreased functional bladder capacity secondary to the IC. However, this presentation proposes a few surgical options for treatment of the devastated urethra. These options include an occlusive sling to help support the urethra, allowing for decreased urinary incontinence, a bladder neck closure, or a urinary diversion. Within these treatment options, the talk explains the ideal patient population for each procedure, considering primary goals of the patient, as well as level of damage to the urethra due to the IC. Those who attend this talk will be able to describe the complications that arise from the chronic usage of indwelling catheters. They will identify current treatment options for managing the devastated urethra, and they will become aware of the on-going monitoring parameters needed to implement when managing someone with NGLUTD with an IC.

Learning Objectives

1. Describe the complications of chronic usage of indwelling catheters
2. Identify current treatment options for managing the devastated urethra
3. Gain awareness of on-going monitoring parameters needed to implement when managing someone with NGLUTD with an IC