

AN UNEXPECTED FOREIGN BODY IN THE BLADDER FOLLOWING LAPAROSCOPIC COLPOSUSPENSION OPERATION

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Gazi Medical Journal 2000; 11: 179-181

ABSTRACT : *Although urinary bladder is an uncommon site, various kinds of foreign bodies have been reported to have been extracted from the bladder. Here, we report a case that presented with severe lower urinary tract symptoms. After cystoscopic evaluation the symptoms was shown to be caused by calculus formation that adhered to a tacker which had inadvertently been placed during laparoscopic colposuspension operation.*

Key Words: *Foreign Body, Bladder, Laparoscopic Colposuspension.*

INTRODUCTION

The urinary bladder is an uncommon site for the introduction of foreign bodies. Surprising objects such as light bulb, thermometer, wax candle, pipe cleaner, cotton bud or copper wire have been found in the bladder. They were usually reported to be inserted for eroticism, curiosity, self-hygiene or because of psychiatric disturbances. Suture materials and staplers also have been reported as iatrogenic foreign bodies in the bladder (1,2). Here we describe a case that has an unreported cause of iatrogenic bladder foreign body.

CASE REPORT

A 45-year-old woman who had undergone laparoscopic colposuspension operation (LCO) in a gynecology clinic two years previously due to stress urinary incontinence (SUI), presented with

severe irritative urinary symptoms, recurrent urinary tract infections (UTI) and SUI. Her symptoms had appeared in the early postoperative period. The patient was admitted several times for her symptoms and treated each time for UTI. With the development of hematuria, she was referred to our clinic. In her detailed evaluation, a foreign body appearance within the bony pelvis was seen on plain abdominal X-ray. Intravenous urography confirmed that this radioopacity was on the left side of the bladder just above the symphysis pubis (Fig. 1). Cystoscopy revealed a calculus adhering to a tacker which had inadvertently been placed through the left side of the bladder dome wall near the bladder neck (Fig. 2, 3). The tacker was extracted with foreign body forceps via a cystoscope, following cystolithotripsy of calculus by punch lithotripter. The symptoms disappeared two weeks after this procedure.

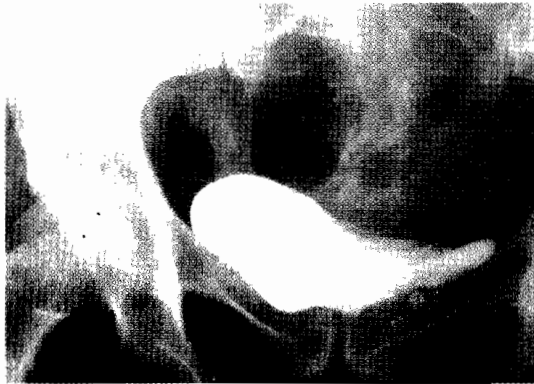


Fig. 1 : Intravenous urography confirming a radioopacity at the left side of the bladder.

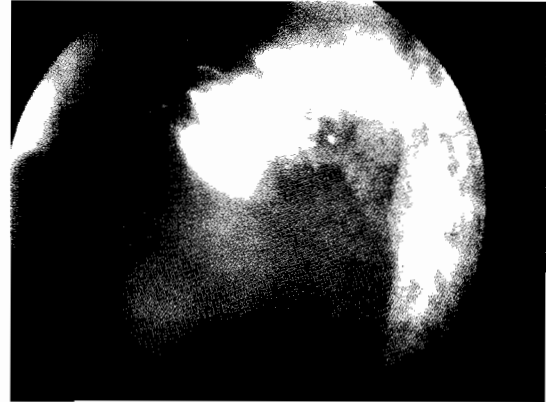


Fig. 3 : Cystoscopic view of tacker placed through the bladder wall.

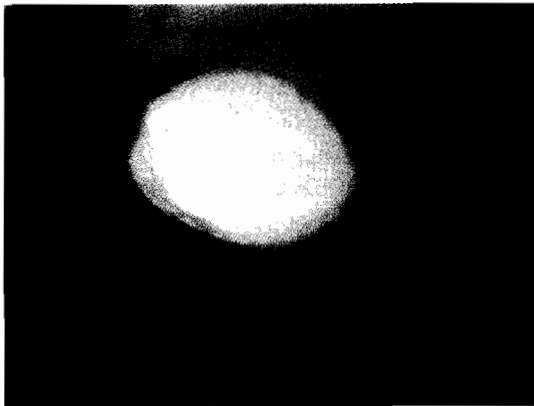


Fig. 2 : Cystoscope showing calculi adhering to tacker.

DISCUSSION

Colposuspension operations are performed by urologists and gynaecologists all over the world. LCO, compared with Burch colposuspension, results in satisfactory short-term cure rates, shorter duration of hospitalisation, faster recovery and lower complication rates. Thus LCO is a feasible treatment option in SUI, if the technique is meticulously applied (3). Suture injury of the urinary tract is one of the most common complications of this kind of procedure (4). However, there was no report about the appearance of intravesical foreign bodies, such as

tacker, following LCO. Reports of iatrogenic transvesical surgical sutures or staplers detaching and forming a nidus for stone formation as in our case, are common in the literature (1).

Foreign bodies should be suspected if pain, irritative symptoms or recurrent UTI occur postoperatively (4). In conclusion, we believe that intraoperative or postoperative cystourethroscopy is essential for early diagnosis and treatment of such complications following LCO.

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REFERENCES

1. Eckford SD, Persad RA, Brewster SF, Gingell JC. Intravesical foreign bodies: Five-year review. *Br J Urol* 1992; 69: 41-45.
2. K peli B, İsen K, Deniz N, Bilici G, Bozkırlı İ. An unusual foreign body in the bladder. *Gazi Medical Journal* 1998; 9: 181-182.
3. Saidi MH, Gallagher MS, Skop IP, Saidi JA, Sadler RK, Diaz KC. Extraperitoneal laparoscopic colposuspension: short-term cure rate, complications, length of hospital stay in comparison with Burch colposuspension. *Obstet Gynecol* 1998; 92: 619-21.
4. Dwyer PL, Carey MP, Rosamilia A. Suture injury to the urinary tract in urethral suspension procedures for stress incontinence. In *Urogynecol J Pelvic Floor Dysfunct* 1999; 10: 15-21.