Kids' urology, what matters?

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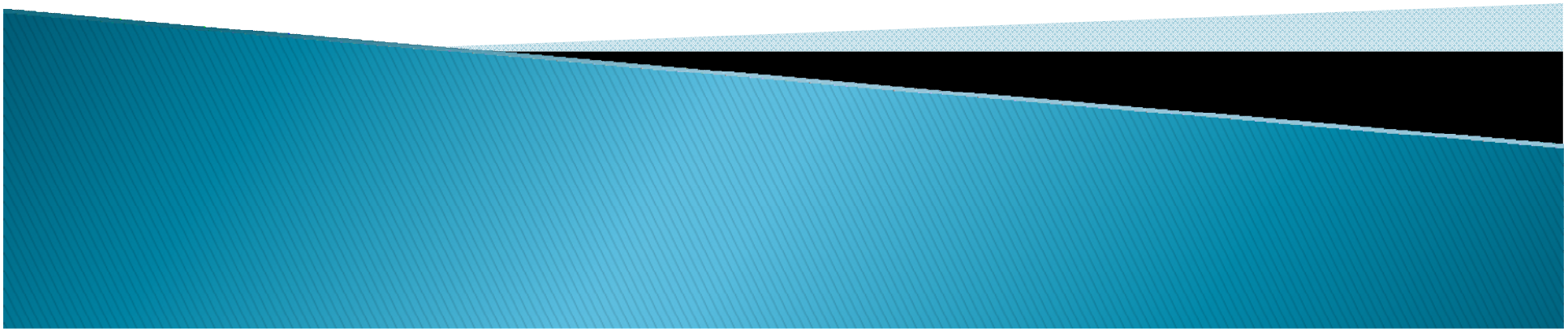
  Tauranga

Don’t overinvestigate
Don’t overtreat

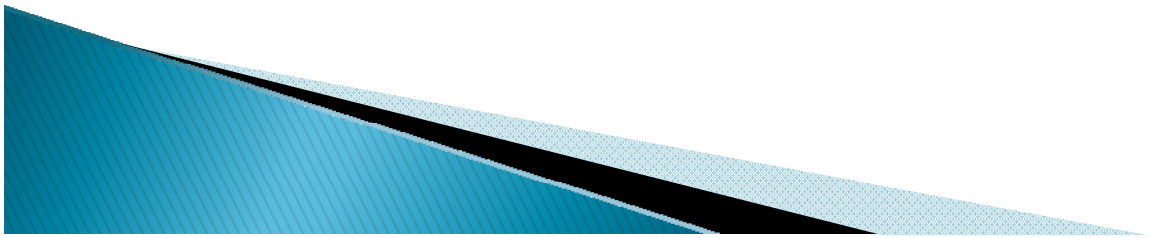


Antenatal upper tract dilation

- Physiological
- PUJ obstruction
- VUJ obstruction
- Vesico-ureteric reflux
- Megaureter
- Valves

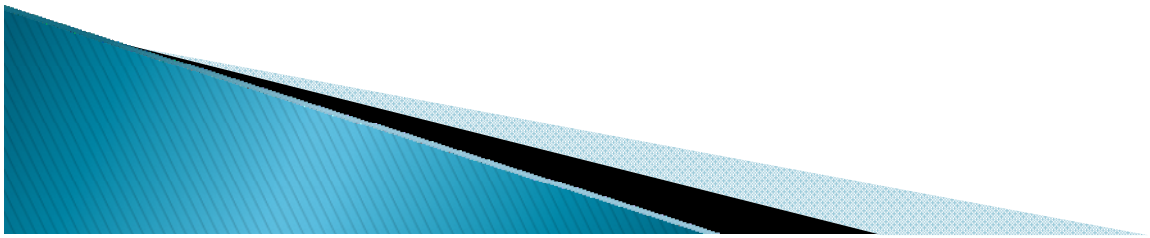
Persisting high grade dilation postnatally or strong fhx reflux

- Investigate Cystogram +/- Nuclear Medicine
- Others USS 1yr (reassurance) and discharge



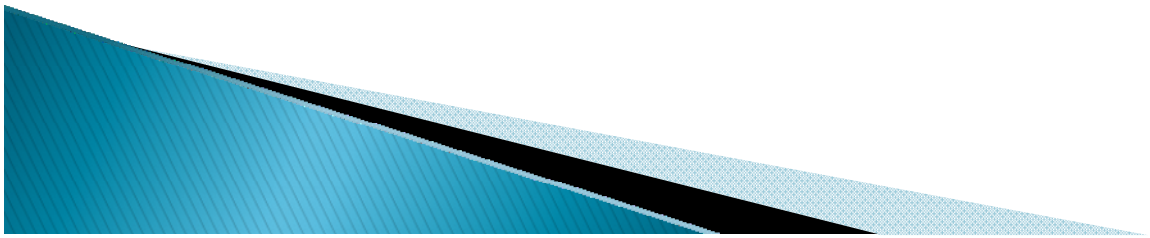
Penis

Foreskin problems
Hypospadias and chordee
Buried penis, small penis



Foreskin

Phimosis physiological <3yrs
Pinhole meatus
Retraction band
Adhesions and pearls



Circumcision

- Neonatal Plastibel, Trimmer etc
- Dissection
- Freeing of adhesions

- Paraphimosis
- Balanitis
- Recurrent UTI/ VUR

Hypospadias

- Leave mild cases alone
- Chordee only degloving
- Significant – Incised urethral plate and tubularise (Snodgrass) 1 stage
- age 12-24 months

Penis problems

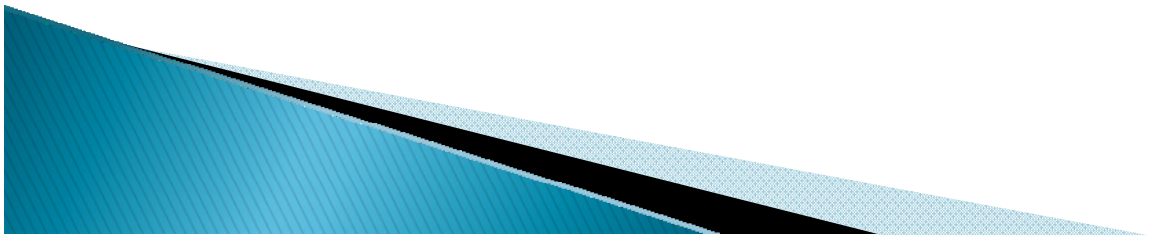
- Too small
- Buried

Undescended testis

- New born, review at 6 months
- Retractile very common
- Ectopic vs. undescended
- Impalpable testis USS vs. MRI

- Over use of USS

- Orchidopexy 12 to 24 months



Lumps

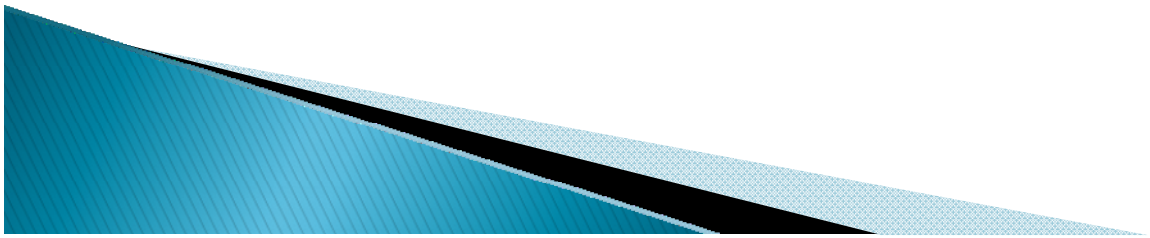
- Testicular tumours rare but occur
- Hydrocoele 90% resolve by age 5yrs
  - Tense
  - Increasing size
- Hernia urgent referral
- Epididymal cysts
- Testicular mico-lithiasis
- Idiopathic scrotal oedema

Urinary tract infection

Investigate if…

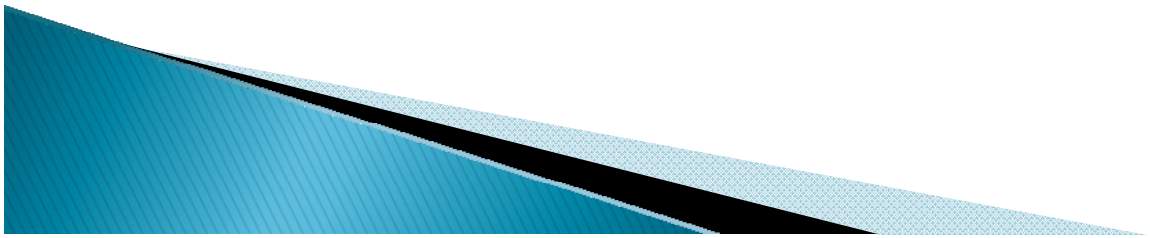
- Under 2 yrs
- Recurrent UTIS
- Complex UTI
- Family History of VU Reflux

- USS and Cystogram +/- DMSA



Vesicoureteric Reflux

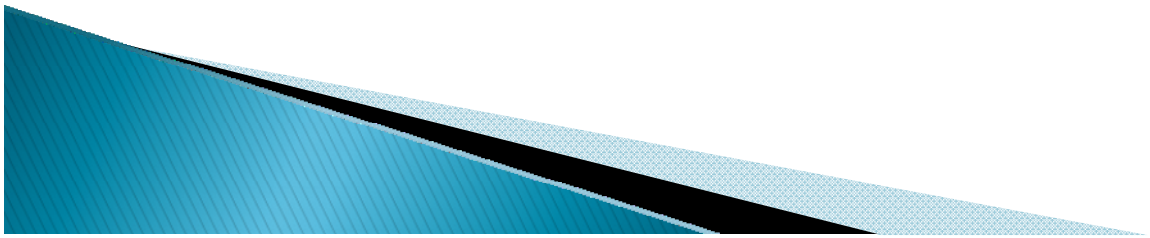
- Over use of investigations, antibiotics
- Antibiotic prophylaxis under two, girls
- ? Role of circumcision
- Symptomatic reflux
- Role of surgery
- ?Deflux



Prophylactic antibiotics in VUR

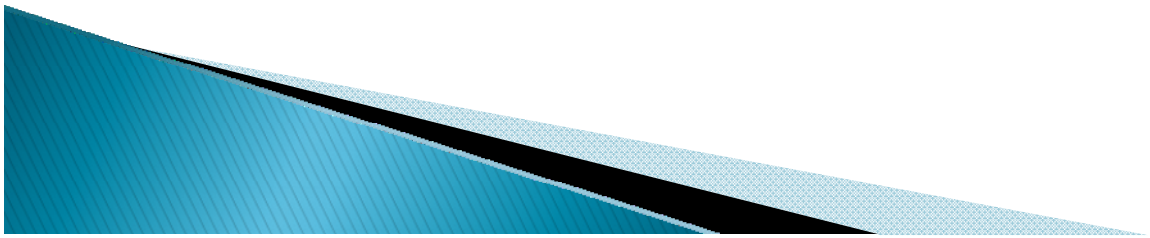
- Decrease UTIs by 6%
- Treat 15 Children to prevent one episode
- Circumcision decreases UTIs by 7%

- Swedish study 204 children
- Resolution of VUR 40% in antibiotic proph
  48% in surveillance
- Deflux 71% but 20% recurred!



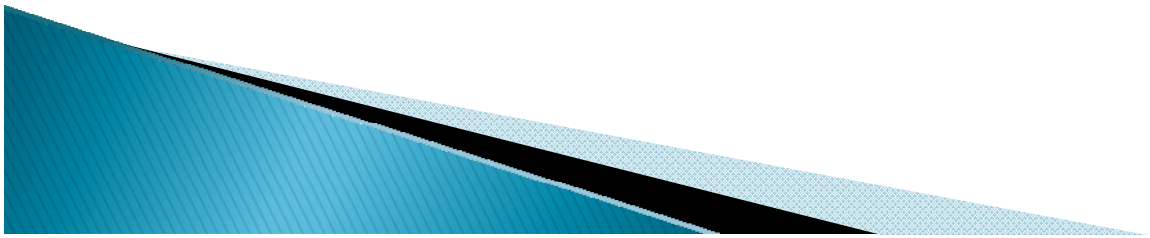
Stones

- Uncommon
- ESWL
- Endoscopic
- Mini perc



Haematuria

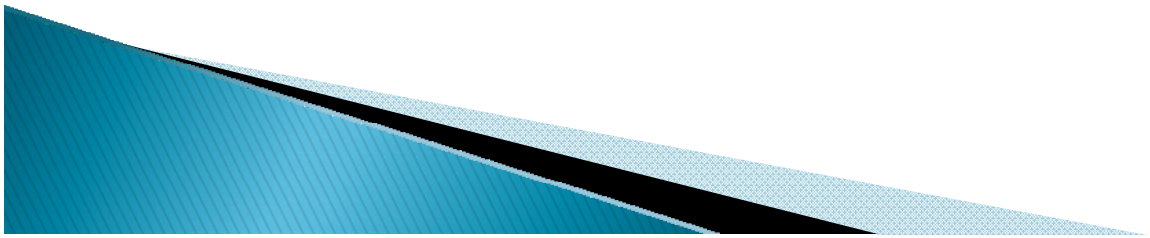
- Almost always a medical (Paediatric) problem



Incontinence

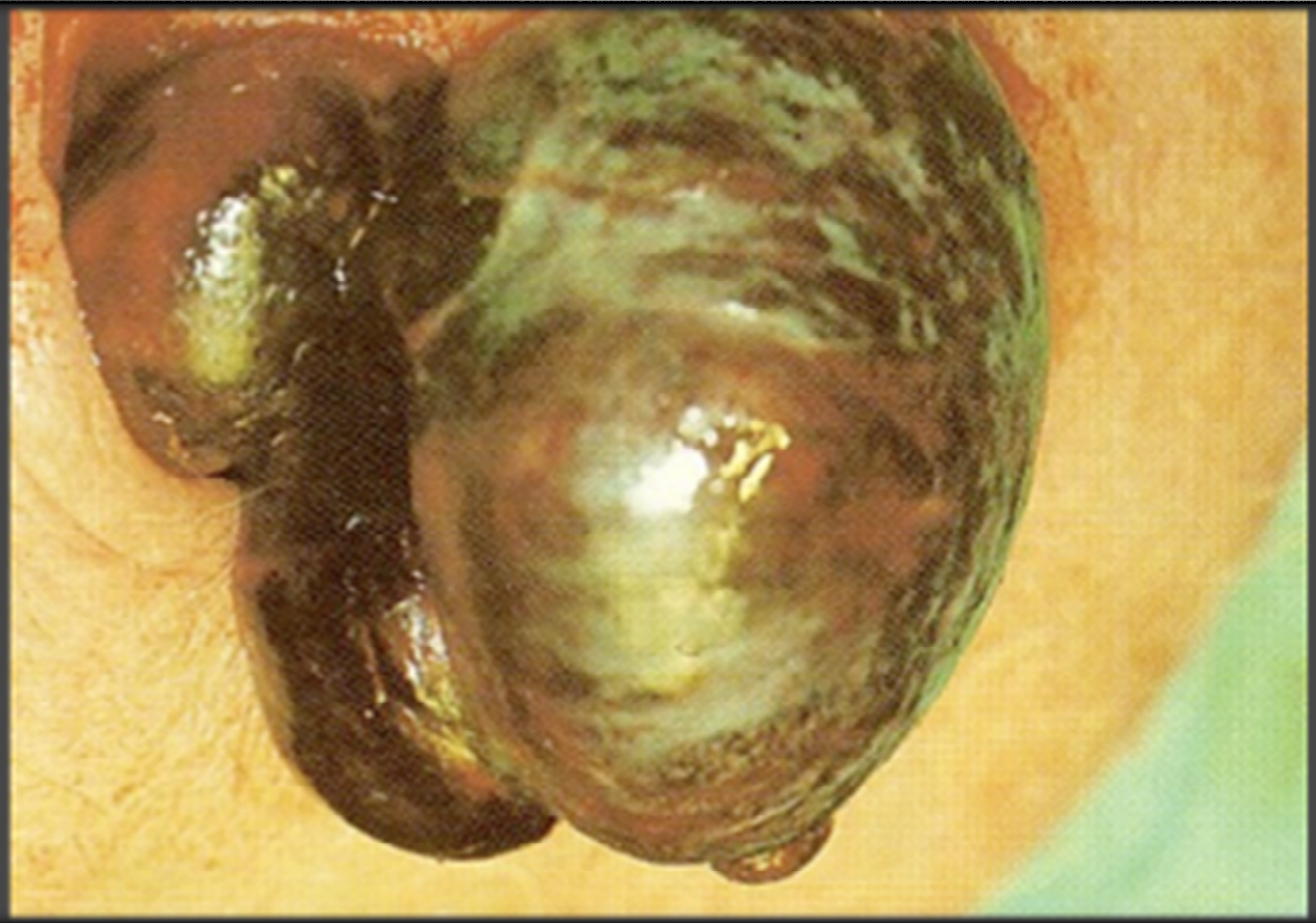
- Enuresis
- Giggle incontinence
- Overactive bladder
- Neurogenic bladder

- Anticholinergics
- Behavioral modification
- Botox



Take home messages

- Do not overinvestgate minor USS abnormalities in neonates or simple UTIs in older children
- Highly selective use of prophylactic antibiotics in VUR
- Don’t miss a torsion, testicular tumour, hernia
- Undescended testis needs treatment by 2yrs
- Urologists cant cure enuresis, OAB



Torsion

Age – puberty to age 40

Torsion testicular appendix in <10 yrs

Sudden on set of pain key point

Intermittent torsion

Importance of careful exam

If in doubt refer!

USS a waste of time and misleading

Crossed leg rule