

**Name of Operation: Cystoscopy and puncture of ureterocoele
(camera in the bladder to assess and treat a bladder-cyst)**

Main issues:

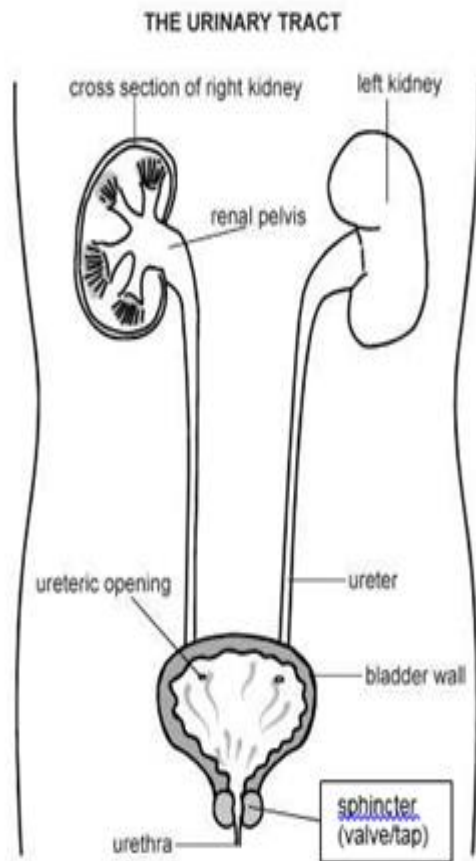
- No external cuts or wounds.
- Blood in the urine, and sore to pee for a few days afterwards (paracetamol helps).
- A catheter (tube) is occasionally left in the bladder for a few days afterwards.

Intended benefits:

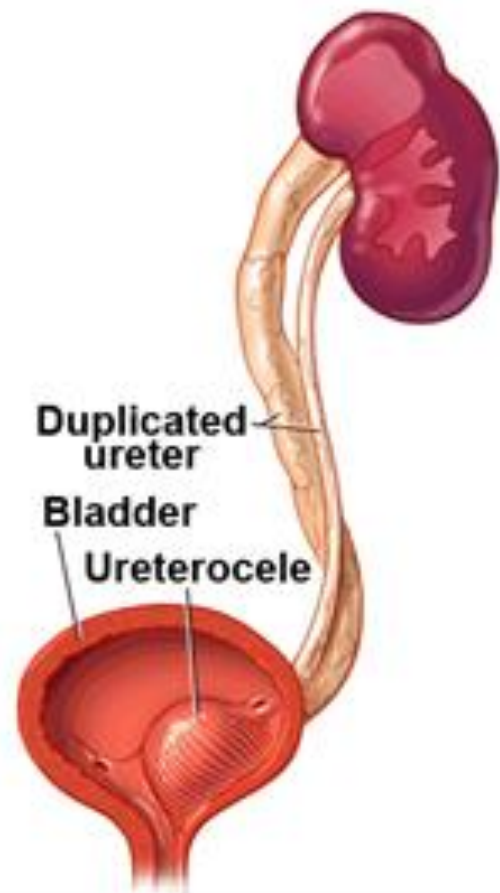
- To improve the drainage of the kidneys, especially of the “blocked” upper part of the kidney connected to the cyst.
- This should reduce the risk of future damage to the kidneys, or serious urine infections, or kidney stones.
- However, this operation unfortunately cannot reverse any previous kidney-damage.

Common or serious risks:

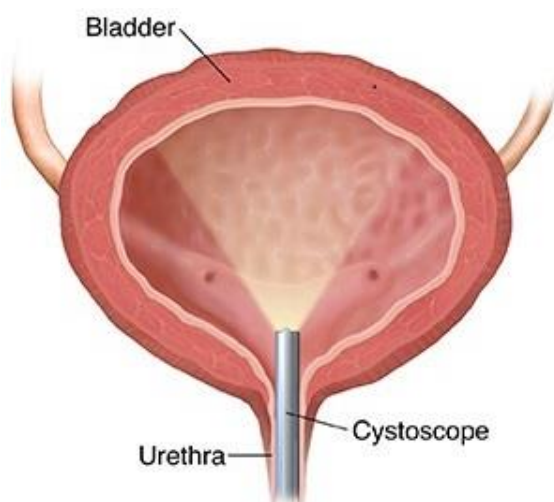
- Being unable to carry on with (or to finish) the operation, due to unexpected technical problems with the equipment on the day. The operation may then need repeated another day.
- Bleeding: rarely serious, but a little blood may appear in the urine over the next day or two. It usually settles if your child drinks plenty. If blood appears in the urine a week or so later, a urine sample should be checked for infection via your family-doctor.
- Infection: usually prevented by the antibiotics given in theatre, and by drinking plenty for a few days afterwards, and by the preventative antibiotics your child is already on (please give a double-dose on the evening of the operation). If you are worried, a urine sample should be checked for infection via your family-doctor or, if your child is very unwell, via your local hospital (sometimes an infection can be quite serious).
- Damage to the bladder and/or the pee-pipe (urethra), including perforation (leak of urine): rare, and usually settles with a catheter in the bladder for a few days.
- Damage to the bowel (which is immediately behind the bladder), including perforation (leak of poo): very rare, but may need an urgent open operation to repair.
- The cyst may be impossible to puncture properly, or may gradually fill up again after a what seems to be a successful puncture at the time: occurs in about 1:5 children, and may need further surgery later.
- Kidney reflux (urine going the wrong way back up to the kidney): occasionally leads to serious kidney infections and kidney damage, and may need further surgery later.
- Anaesthetic problems (rarely serious, but around 1 in 250,000 general anaesthetics in children can be fatal).



1. A diagram of normal waterworks
(based on www.fermelumic.com/urinary.html#)



2. A diagram of a double ("duplex" or "duplicated") kidney-system with a ureterocolic (cyst) in the bladder
(© Mayo Foundation for Medical Education and Research: <https://www.mayoclinic.org/diseases-conditions/ureteral-obstruction/symptoms-causes/syc-20354676>)



3. A diagram of a cystoscope (telescope) going along the urethra (pee-pipe) into the bladder
(from www.fairview.org/patient-education/85434)