

FALLOPIAN TUBES FOR NIPPLE CONSTRUCTION IN CONTINENT CATHETERISABLE RESERVOIRS: PRELIMINARY RESULTS.

Hypothesis / aims of study

Continent catheterisable reservoirs are a good alternative for bladder reconstruction in patients with a non functioning urethra or needing urethral resection for oncological reasons. Ideal for nipple construction are existing tubular structures and the best results are achieved with the appendix. However the appendix is not always available and ileum is reconfigured for nipple construction with higher rates of incontinence. The fallopian tubes are often available tubular structures and here we present our results using the fallopian tube for nipple construction.

Study design, materials and methods

In 3 female patients, who received a continent catheterisable ileal reservoir and did not have an appendix the fallopian tubes were detached from the uterus and catheterised with a Ch. 12 catheter. If catheterisation was possible the tube was dilated to Ch. 14. Care was taken to leave the vascularisation intact and the ovary was left attached. After adequate mobilisation and spatulation the fallopian tube was implanted end to side into the reservoir and the reservoir wall was closed over the whole length to create a continent nipple. The nipple was then implated into the umbilicus. A Ch 14. ballon catheter and a suprapubic catheter were placed and left for 6 weeks. During this time the reservoir was rinsed 3 x daily to avoid catheter blockage by mucus. After 6 weeks patients were instructed on how to catheterise.

Results

All 3 women with a fallopian tube nipple were continent and remained continent after a follow up of 5, 8 and 72 months. 1 patient required incision at the skin level under local anesthesia for nipple stenosis after 3 years. In one patient catheterisation was difficult for the first 2 weeks and then after adequate instruction unproblematic and remained so. No further nipple associated complications occurred.

Interpretation of results

The fallopian tube seems to be a good option for construction of a catheterisable nipple in the female.

Concluding message

Our preliminary results with one long term follow up suggest that the fallopian tube for nipple construction provides good results, and may be an alternative to reconfigured ileum.

<i>Specify source of funding or grant</i>	none
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	No
<i>This study did not require eithics committee approval because</i>	retrospective evaluation with informed consent
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes