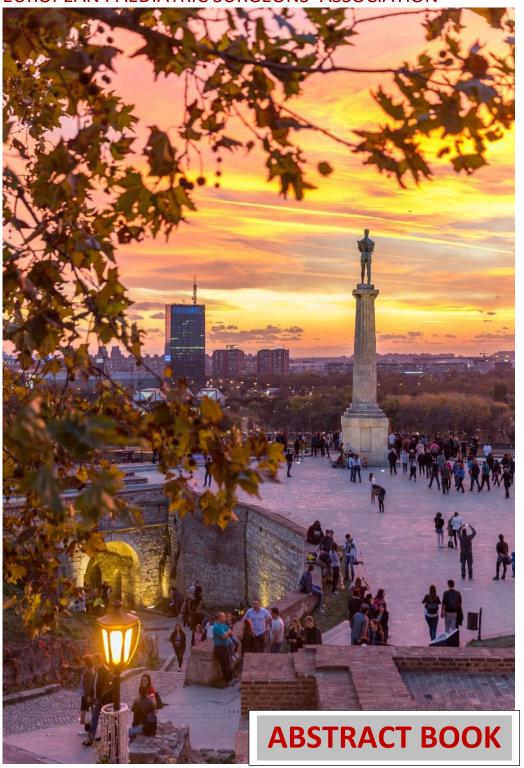
EUPSA 2@19

EUROPEAN PAEDIATRIC SURGEONS' ASSOCIATION



20th ANNUAL CONGRESS OF THE EUROPEAN PAEDIATRIC SURGEONS' ASSOCIATION

BELGRADE, SERBIA - June 12^{th -} 16th, 2019

Chairpersons: Prem Puri (Ireland), Atsuyuki Yamataka (Japan)

UR04: LOWER URINARY TRACT DYSFUNCTION; IS THERE A UNIQUE SYMPTOM?

Mehmet Ali Özen¹, Mehmet Taşdemir², Murat Serhat Aygün³, Işıl Necef⁴, <u>Emrah Aydın</u>¹, Ilmay Bilge², Egemen Eroğlu¹

¹Department of Pediatric Surgery, Koç University, School of Medicine, İstanbul, Turkey. ²Department of Pediatric Nephrology, Koç University, School of Medicine, İstanbul, Turkey. ³Department of Radiology, Koç University, School of Medicine, İstanbul, Uganda. ⁴Department of Psychiatry, Koç University, School of Medicine, İstanbul, Turkey

AIM OF THE STUDY

Lower urinary tract dysfunction (LUTD) is a common disorder which is reported in 20% of school-aged children. There is currently no consensus in the diagnosis of these children, due to the subjectivity of the symptoms. In this study, we aimed to investigate the relationship between each LUTD and its associated symptom, using uroflowmetry/electromyography (UF/EMG) as a diagnostic tool.

METHODS

Hospital records of patients admitted due to LUT symptoms between 2015 and 2018 were explored. Data were analyzed in 4 groups per voiding dysfunction symptom score, bladder diary, Bristol stool form scale, and UF/EMG which were overactive bladder (OAB), dysfunctional voiding (DV), underactive bladder (UAB) and primary bladder neck dysfunction (PBND), respectively.

MAIN RESULTS

There were 189 children (median age 7.1 years, range 5-13 years) of which 78 (56,1%) were female. The primary symptoms were summarized in Table 1. The statistically significant difference between groups could only be proved hesitancy and constipation (p<.001). Hesitancy was present in 89.4% with PBND and constipation was present in 78.6% of patients with DV.

CONCLUSION

While certain symptoms are often presumed by clinicians to imply specific diagnoses, this study demonstrated that hesitancy and constipation are the only symptoms that are unique to LUTD. It is highly recommended that repetitive UF/EMG should be performed every patients with LUTD instead of relying on subjective symptomatology in the initial assessment in conjunction with Bristol stool scale.

Table 1: Presenting symptoms of four lower urinary tract conditions

Patients	OAB 91	DV 61	UAB 18	PBND 19
Urgency	59(64.8%)	38(62.2%)	6(33.3%)	7(36.8.8%)
Day time incontinence	54(59.3%)	38(62.2%)	6(33.3%)	5(26.3%)
Night time incontinence	24(26.3%)	13(21.3%)	4(22.2%)	3(15.7%)
Holding maneuvers	53(58.2%)	33(54%)	4(22.2%)	5(26.3%)
Hesitancy	0(0%)	9(14.7%)	4(22.2%)	17(89.4%)
Intermittency	23(25.2%)	31(50.8%)	10(55.5%)	4(21%)
Constipation	22(24.1%)	48(78.6%)	5(27.7%)	3(15.7%)
PVR >20 ml, 7-13 years	20(22%)	30(49.1%)	10(55.5%)	4(21%)
>10 ml, 5-6 years			2(22)	-/
Actual/Real BC decrease	37(40.6%)	19(31.1%)	0(0%)	3(15.7%)

161

EUROPEAN PAEDIATRIC SURGEONS ASSOCIATION

CERTIFICATE OF ATTENDANCE

This is to certify that

Emrah Aydin

PASIVNO UČEŠĆE\PARTICIPANT

Broj bodova/Number of credits 28

attended the

20th Annual Congres Of European Paediatric Surgeons' Association Belgrade (Serbia), 12th – 15th June 2019,, Crowne Plaza Hotel – Congress Centre

Full attendance at this meeting is awarded with 28 CMS credita by the EACCASES.

he FACCME is an institution of the European Union of Medical Spocialists (UGMS), www.uems.neb Each medical specialist should claim only those credits that lye/sho actually spenic in the endocational activity. ECMEGS are recognized by the American Medical Association towards the Physician's Recognizion Award (PRA). To convert ECMEGs credit to AMA PRA category Loredit please tunbed the American Medical Association for the American Association for the American Association for the American Association for the American Association for the American Association for the American Association for the American Association for the American Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the Association for the

fei be brider

Prof. Glovanna RICCIPETITONI EUPSA President

Prof. Wikke PAKARINEN EUPSA Education Office Chalman

20th Annual Congres Of European Paediatric Surgeons' Association, 12th – 15th June 2019., Belgrade, Serbia