

Side-effects

- Persistent pain in penile shaft
- Pain in Perineum when seated
- Migration of the device
- Erosion of device
- Possible infection
- Long term yields the risk for encrustation and recurrent infections
- NB! Each person is unique and for this reason symptoms vary!

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PATIENT INFORMATION BROCHURE

URETHRAL STENT -UROLUME-

See this live on:
vidscrip.com/urojo

Patient well-being is my first priority!

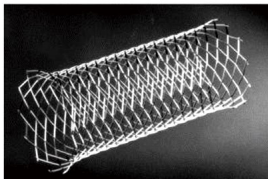
Urethral Stent UROLUME

Minimal invasive management for the relief of LUTS (lower urinary tract symptoms) or Urinary Retention caused by an Urethral Stricture

Why is it done?

- This procedure is performed when concentric scarring in the urethra causes LUTS and /or Urinary Retention
- Symptoms include: a weak stream, nightly urination, frequent urination, inability to urinate, **(LUTS)** and Urinary Retention
- This is alternative to an invasive procedure where long periods of anaesthetic is contra-indicated.
- Usually for chronically sick patients who cannot under go surgery, yet are active enough not to want a permanent catheter.
- Patients who don't want to / cannot do intermittent self-dilatation of these strictures
- Don't want a permanent Indwelling Catheter

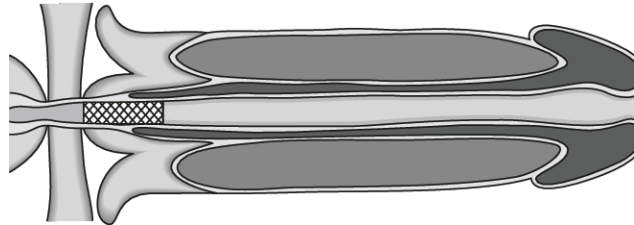
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Urolume™. AMS, Minneapolis MN

How is it done?

- Patients will receive a sedation with local anaesthetic gel placed in the urethra.
- A cystoscopy is performed by placing a camera in the urethra with the help of a lubricant jelly and an irrigant (fluid).
- The measurements of the urethral is taken (length)
- Appropriate length coil is chosen.
- The device is placed through the cystoscopic sheath, to sit snug in the prostate urethra stretching over the length of the stricture
- Prophylactic antibiotics will be given to prevent any infections.



What can go wrong?

- Any anaesthesia has its risks and the anaesthetist will explain this to you.
- You may in extreme cases experience blood loss, seldomly requiring a blood transfusion.
- You may experience initial difficulty in urination.
- You may endure pain for a few days.
- Perineal pain when seated. Caused by palpation of device
- Very rarely will you require a catheter.
- NB! Each person is unique and for this reason symptoms vary!

What next?

- You may have an overnight stay in hospital.
- You will be discharged as soon as you can completely empty your bladder.
- You may initially suffer from urge incontinence and will improve within the next 6 weeks.
- Perineal pain
- Penile pain will improve over the next 7 days.
- Allow for 6 weeks for stabilization of symptoms.
- There may be some blood in your urine. You can remedy this by drinking plenty of fluids until it clears.
- May develop an infection, requiring antibiotics
- A follow-up appointment will be scheduled for 6 weeks.
- This is a reversible procedure.
- Don't hesitate to ask Jo if you have any queries
- **DON'T SUFFER IN SILENCE, OR YOU WILL SUFFER ALONE!**

