

# Study day: Clinical cases in urodynamics A morning with Paul Abrams

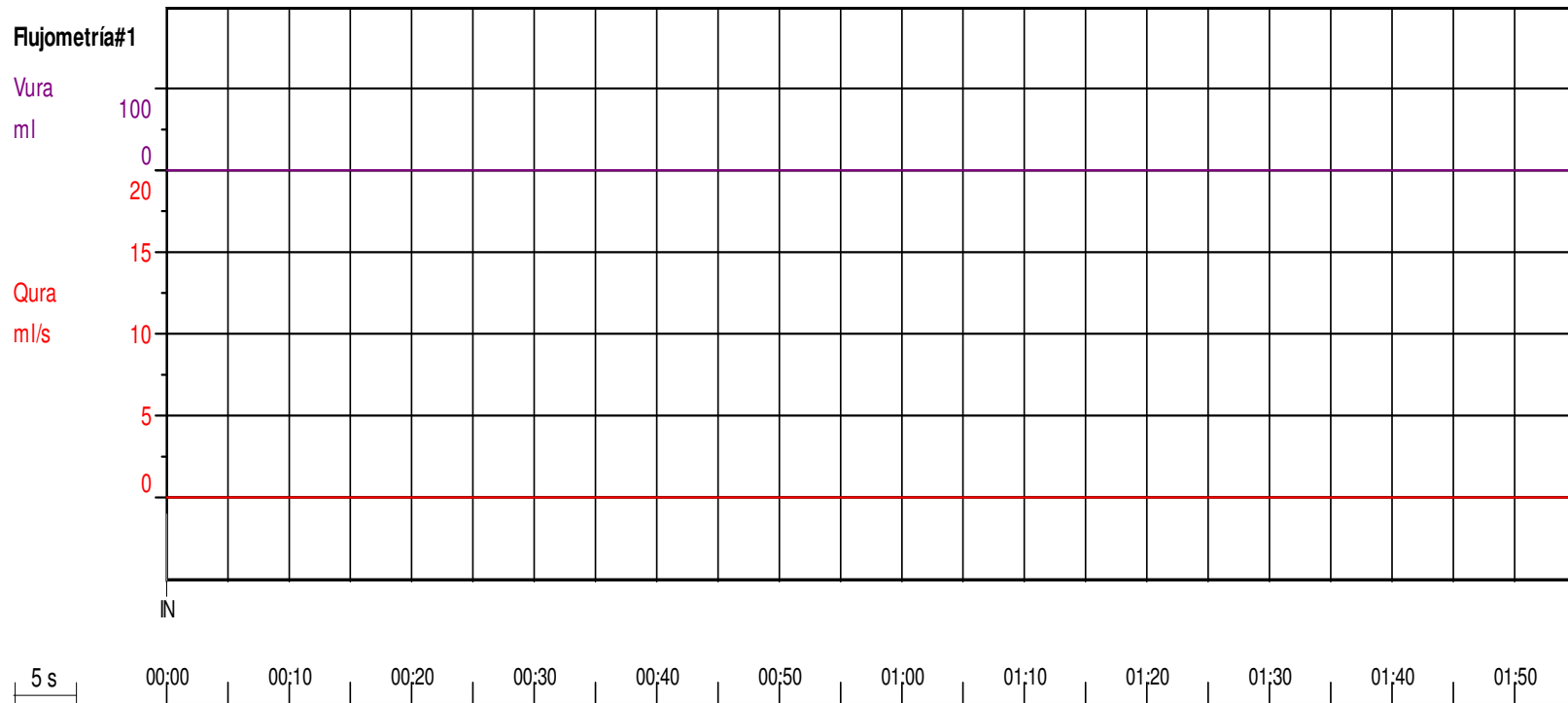
**Clinical cases presented by: Jose Emilio Batista**  
Centro Médico Teknon, Barcelona

## Detailed clinical history

- 44 year old man.
- Sepsis and Type A Flu requiring 4 months at ICU. Bilateral lower limb amputation.
- Indwelling catheterization since december 2010 (6 months). Several UTI's
- No neurological sequelae
  
- AIM OF URODYNAMIC STUDY:  
Assessment of detrusor contractility.

# Urodynamic test: Uroflowmetry

## Tracing

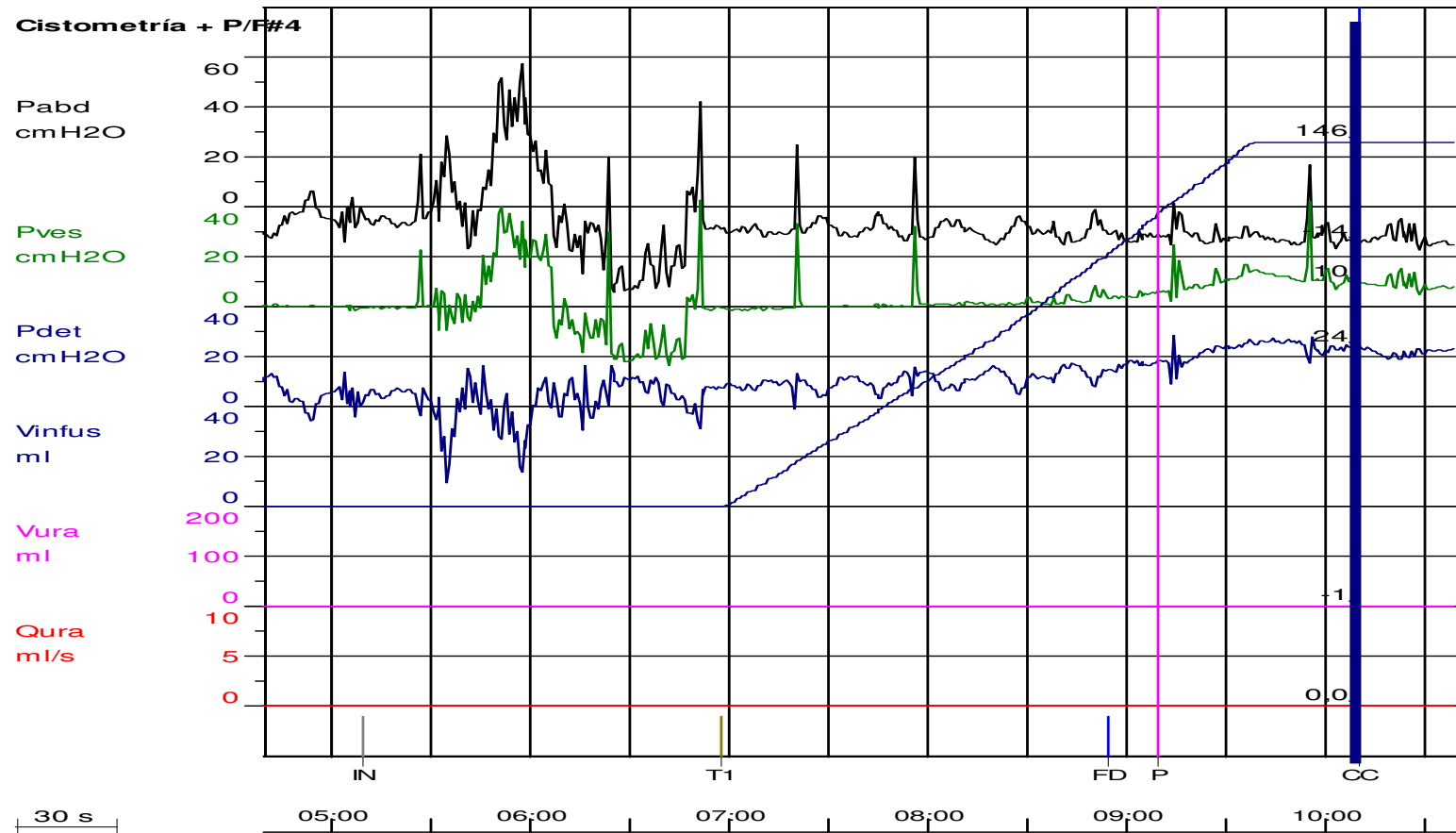


## Urodynamic test: Uroflowmetry

- **Result / Comment**
  - Maximum flow: 0ml/s
  - Void volum: 0ml
  - Residual urine: 150 ml

# Cystometry

## Tracing



## Cystometry

- **Results:**

	<u>Infused Vol</u>	<u>Pves</u>	<u>Pdet</u>
First desire	101ml	4cmH <sub>2</sub> O	15cmH <sub>2</sub> O
Max Cyst Cap	198ml	10cmH <sub>2</sub> O	24cmH <sub>2</sub> O

## Cystometry

- **Comment**

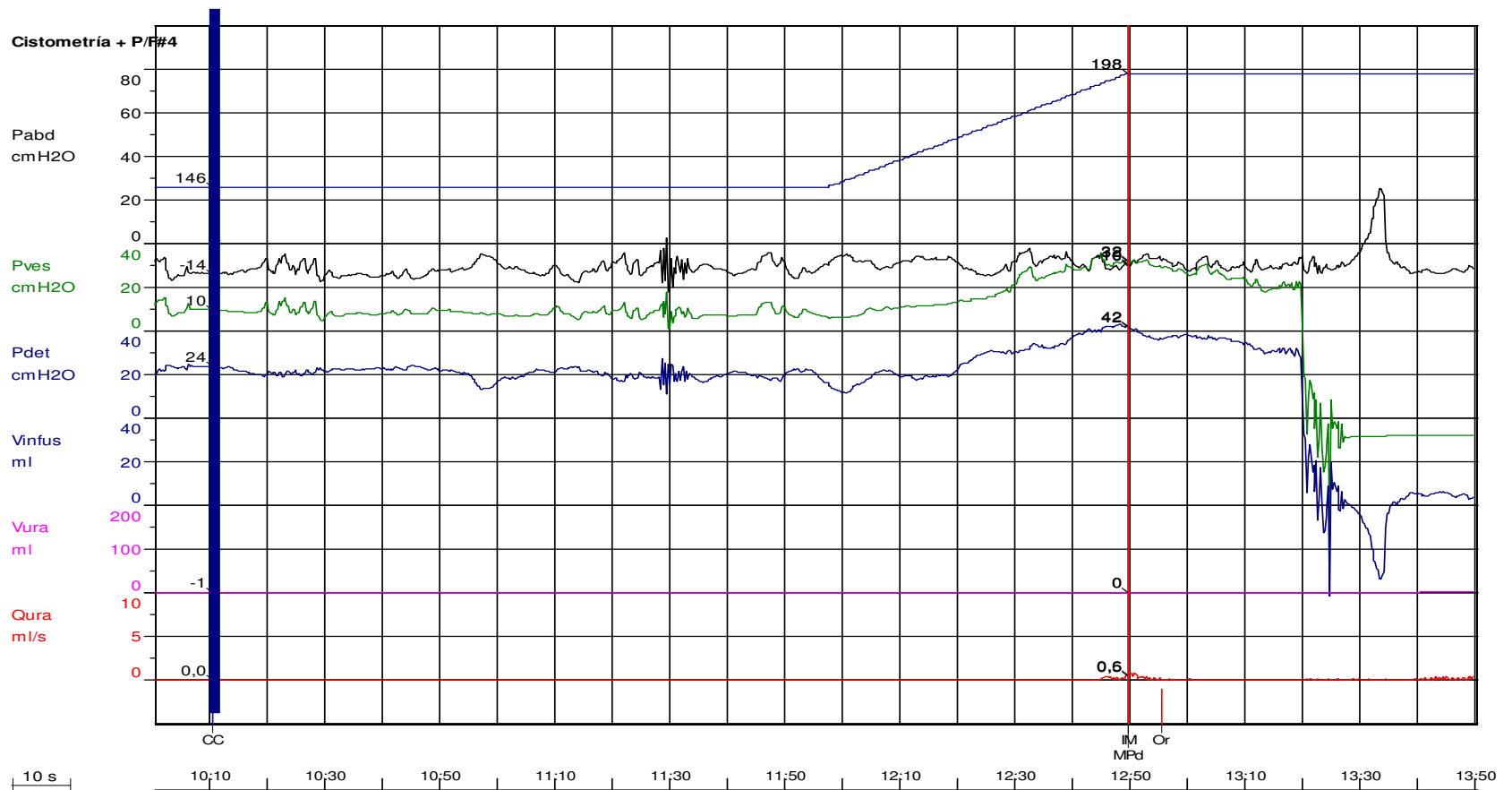
- Low-capacity bladder
- Low bladder compliance.

(Probable de –functionalized bladder after long term indwelling cath.)

- No leakage with increased abdominal pressure.
- Absence of un-inhibited detrusor contractions.

# Urodynamic test: Pressure/Flow Study

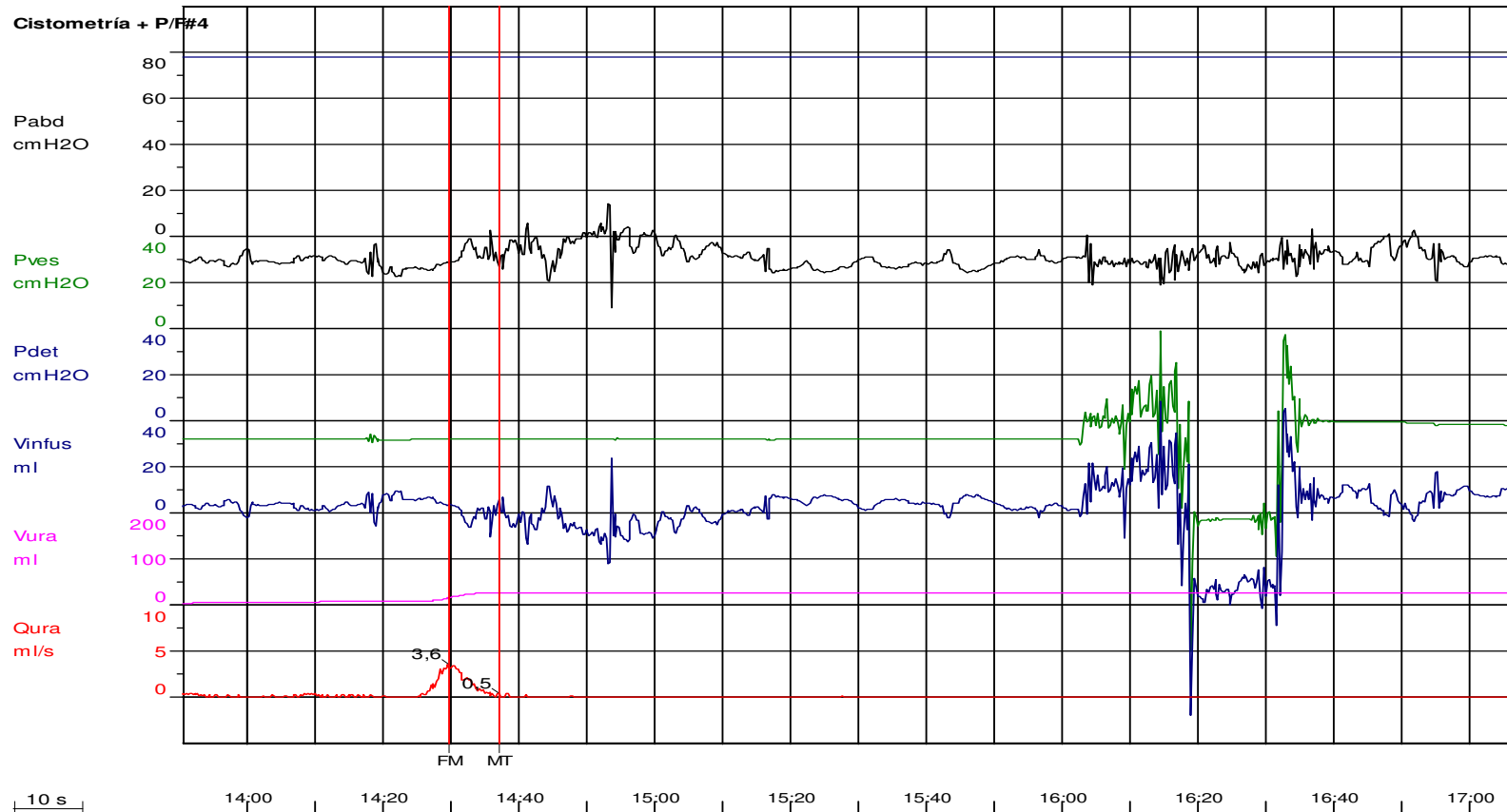
## Tracing





# Urodynamic test: Pressure/Flow Study

## Tracing



## Urodynamic test: Pressure/Flow Study

- **Result:**
  - Acontractile detrusor.
  - Short duration voiding.
  - Pdet -37 cmH<sub>2</sub>O
  - Qmax 4 ml/s.
  - Voided Volume: 28ml
  - Post void residual: 170 ml

## Therapeutic approach

- Continue with indwelling catheterization in acute center until transfer to reference Center, where self-intermittent catheterization will be started.