

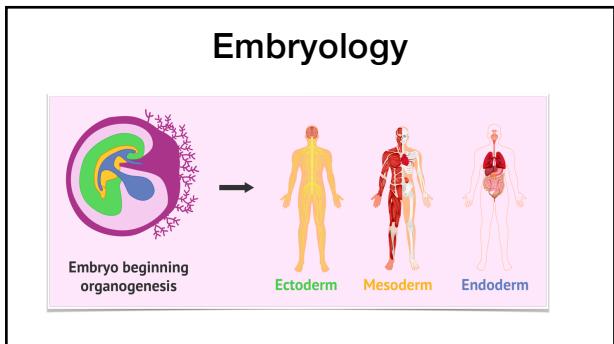


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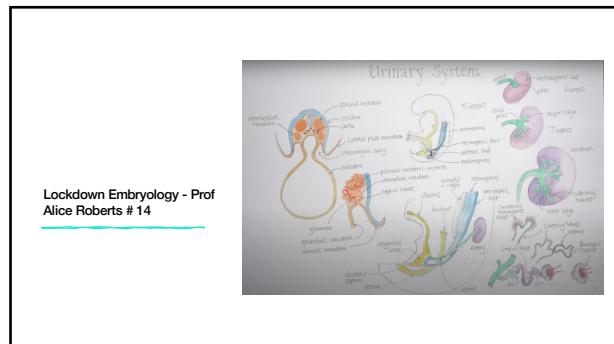
Hvað ætlum við að fjalla um?

- Antenatal Hydronephrosis
- UPJ
- PUV
- Megureter
- VUR
- Hypospadiur

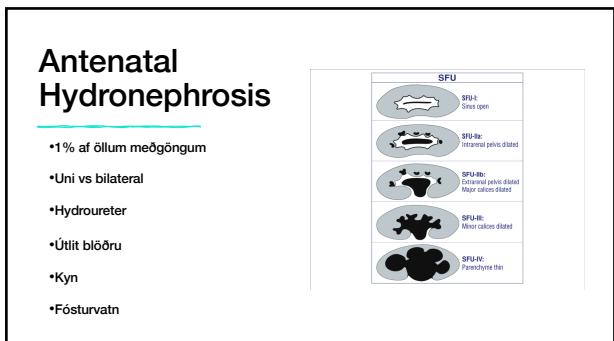
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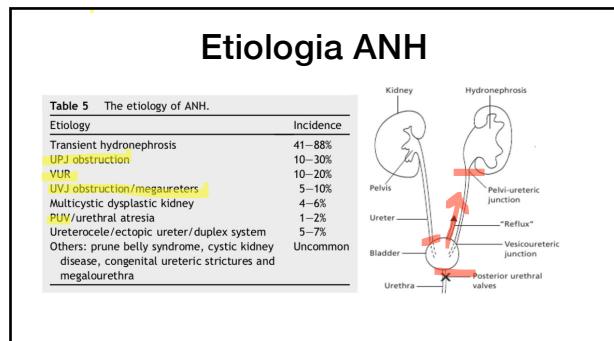
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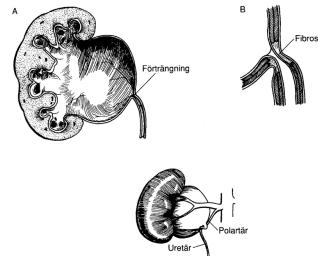
Greiningaraðferðir eftir fæðingu

- Ómskoðun
- Isótóparannsókn
 - *MAG 3 – Mercaptoacetyltriglycide
 - *DMSA – Dimercapto succinic acid
- MUGG
- *(Cystoscopy med retrograde skuggaefnirannsókn)
- *(CT/MR)

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Ureteropelvic Junction Stenosis

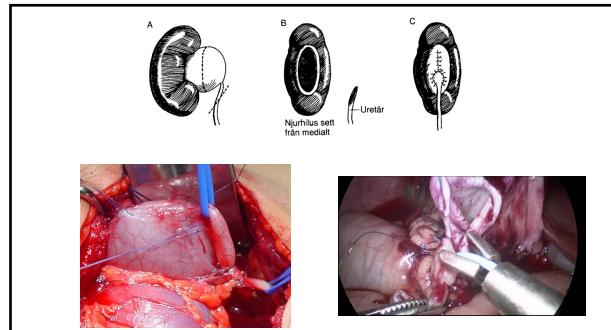
- 1:1500
- M>F = 2:1
- Intrinsic vs extrinsic
- Ómun
- MAG -3
- Einkenni +/-



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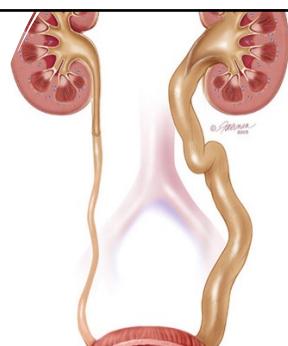
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Megaureter

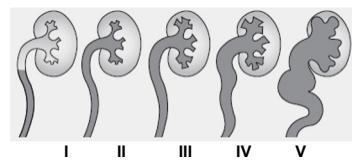
- Þermál >7mm við blöðru
- Vesicoureteral junction stenosis (VUJ eða POM)
 - Reflux
- Duplex með ectopy



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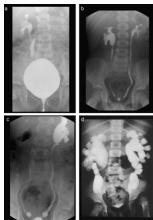
Vesikoureteral reflux (VUR)

- Tiðni 1-2%
- Orsök hjá ca 30% af börnum með UVI
- Mun algengara hjá stulkum
- Þvag bakkar upp þvagleiðara til nýrma
- <4 árs álder
- Gráða 1-5 eftir MUCG



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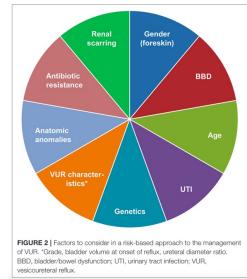
Micturitionsurethrocystogram



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Meðferð

- Observation
- Fyrirbyggjandi sýklalyf
- Endoskopisk meðferð (Deflux) III-V
- Reimplantation (failed Deflux eða gr V)
- Áhalmarknið er að koma í veg fyrir nýmaskáða



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Vesikoureteral reflux

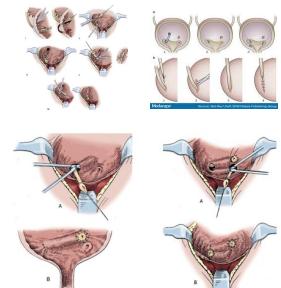


Deflux® (dextranskúlur í hyaluransýra) læknar VUR í 80% tilfella

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Re-implantation

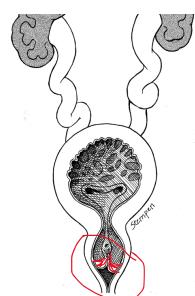
- Cross trigonal reimplantation
- Leadbetter politano
- Lich Gregoir



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Urethral valves - PUV

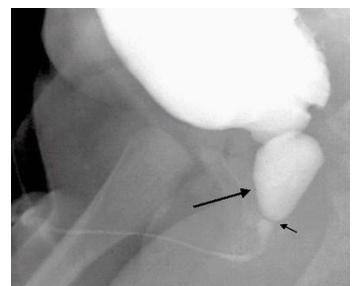
- 1:5000 drengum
- Bladder outlet obstruction
- Bilateral hydronephrosis
- Nýmaskaði/dysplasia
- Detrusor hypertrofia
- Oligohydramnion - Lungnavanþroski



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Posterior Urethral Valves - einkenni

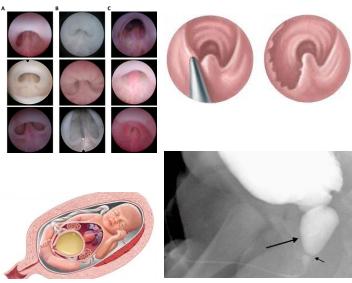
- Öndunareriðleikar
- Fyrirferð neðri hluta kvíðar - Ascites
- Erfiðleikar við þvaglát - slópp buna
- Sýkingar
- Failure to thrive



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Bráð meðferð PUV

- *Létt á þvagblöðru
- *SP/þvagleggur
- *Nephropelostomia?
- *Endoskopisk aðgerð
- *Obs Polyuria



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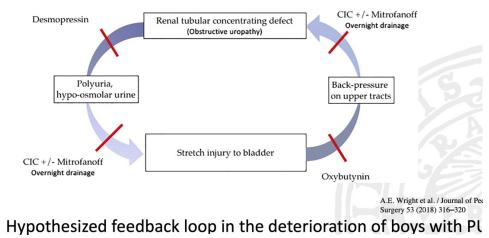
Snemmbúnir fylgikvillar PUV

- Þykveggja blaðra leyfir ekki tæmingu ureters
- NP
- Ureterostomia
- Vesikostoma
- Pop off mekanismi – ónýtt nýra
- Sýkingar
- nefrekтомi



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Síðbúnir fylgikvillar PUV



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Eftirlit – síðbúin meðferð

- Venja af bleju snemma - fylgjast vel með þvaglátum
- Lyfjameðferð: antikolinergika, alfablokkir
- 4 t þvagliáta obs
- Flæðimælingar/restþvag
- 20-30% nýrbabilun
- CIC/þvagleggur yfir nöttr
- Mitrofanoff kanall
- Mickeyhnappur til tæmingar

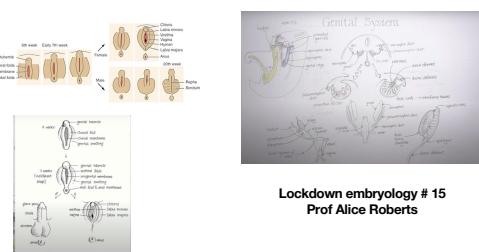
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Hypospadias - Neðanrás

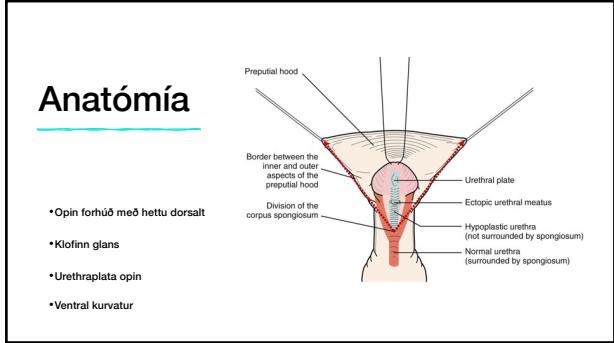
- Gríska
- “Hypo” och “spadon”
- Galen 130-199 AD

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Myndun ytri kynfæra



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Incidens och etiologi

• 1/125 nyfödd pojkar i Sverige
Norénmark et al. Population-Based National Study of Hypospadias in Sweden, 1973-2009: Incidence and Risk Factors. J Urol 2013; 191: 732-6.

• 300 per år i Sverige

• Risk faktorer:

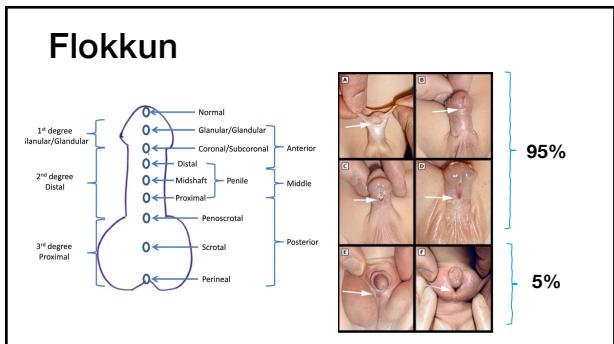
- Närsläkt med hypospadi
- Låg födelsevikt eller liten placenta
- Twillingar
- Hög blodtryck eller pre-eclampsia i mor

– Endocrine disrupting factors?

– Vissa syndromer t.ex.

- Optiz B
- Denys-Drash
- VACTERL

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General principles of treatment

- Timing of surgery
- Penile hypoplasia – hormon behandling?
- Associerade anomalier – retentio testis
- Kirurgisk teknik

Foreskin
Glandular
Coronal
Distal penis
Midshaft
Proximal penis
Penoscrotal
Scrotal
Perineal

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Surgical principles

- Correction of ventral curvature
- Reconstruction of the missing urethra with adequate calibre
- Glanuloplasty and sometimes spongioplasty
- Skin covering: elongation or reconstruction of the short or missing ventral skin

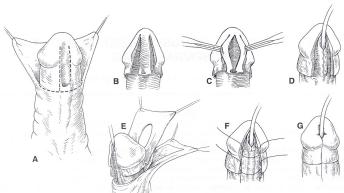
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Operationer

- Förhudsplastik/circumcision*
- MAGPI*
- TIP – Snodgrass*
- Mathieu
- Onlay Island flap
- Tubularized preputial Island flap (Duckett)
- STAG – Bracka*
- Koyanagi – Nonomura
- Hadidi
-
-

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TIP - Snodgrass



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TIP - Snodgrass



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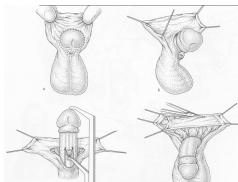
Erektsionsprov



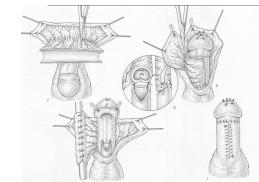
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Island flap or free transplant

STAG



Duckett



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STAG - Bracka



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HOPE/HOSE/(PPS)

• Valideruô instrument

• Post op kontroll:

- Meatus lega
- Glans æstlit
- Hæd å skaffi
- Framsveigja

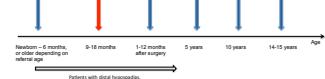


Figure 14 The Swedish national surveillance program for hypospadias. Adapted from Swedish Healthcare program for hypospadias.

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Take home message

- Bilateral hydronephrosa hjá dreng – PUV?
Þvagbuna?, Þvagleggur og MUCG skjótt
- Unilateral hydronephrosa – hvernig líta
þvagleðarar út? UPJ vs POM eða VUR
- VUR – einstaklingsmiðuð meðferð, kir
meðferð III-V, meðhöndla BBD samtimis
- Löng hypospadia og retentio testis –
merki um undirviriliseringu, DSD?