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## Improvement of neurogenic bladder by lumbar disc herniation surgery.

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### Abstract:

Neurogenic bladder means the morphofunctional changes of the urinary bladder and sphincter as a result of central or peripheral neurological lesions. Data from the objective examination of patients who complain of classic lumbar pain may suggest an disk etiology, but this cannot be excluded even without the presence of musculoskeletal pain. If the patient has neurological deficits that worsen progressively with myelopathy, or cauda equina syndrome, then the Surgical indication is absolute for all levels where disk herniation has occurred. In this study we made a summary of the relative indications for surgery at each level of the hernia. This retrospective study analyzed post operative patients with bladder function for cauda equine syndrome 24h and 48h after intervention, or 48 hours from the onset of symptoms. The study included 42 patients and was conducted between January 2017 and December 2019, in the urology department, University Hospital Centre "Mother Teresa", Tirana, Albania. Several factors were evaluated regarding the role of timely intervention: bladder function, sexual dysfunction, LDH values, rectal incontinence, etc and degree of compression of the spinal canal. Data were categorized into the group with normal bladder function, and with abnormal function. Patients who were intervened within 48 hours had better postoperative results. In 23 patients who were operated within 48 hours, 19 (82.6%) recovered a normal bladder function. While from 27 patients with mild dysfunction bladder in hospitalization, 21 of them fully recovered bladder function after surgery. Among 19 patients who were operated after 48 hours, only 8 of them (42.1%) recovered normal bladder function. This study showed that patients who were operated within 48 hours from the start of symptoms of urinary dysfunction, were more likely to recover their function bladder compared to patients who were operated on later. Patients with mild dysfunction bladders were more likely to recover function after decompression surgery, compared to patients with severe bladder dysfunction.

### Biography:

I am a medical doctor, surgeon urologist from Tirana, Albania. I graduated on 2000 from the Faculty of Medicine, University of Tirana, Albania. Afterwards I was specialized for four years in Urology and currently I work at the at the University Hospital Centre "Mother Teresa" in Tirana at urological department. Currently I am doing Phd in this domain at Tirana University, in Tirana - Albania. References 1. Lorio M, Kim C, Araghi A, Inzana J, Yue JJ. International Society for the Advancement of Spine Surgery Policy 2019: surgical treatment of lumbar disc herniation with radiculopathy. Int J Spine Surge 2020; 2. Qureshi A, Sell P. Cauda equina syndrome treated by surgical decompression, the influence of timing on surgical outcome. Euro Spine J 2007; 3. Wilson CA, Roffey DM, Chow D, Alkherayf F, Wai EK. A systematic review of preoperative predictors for postoperative clinical outcomes following lumbar discectomy. Spine J 2016; 4. Siracusa G, Sparacino A, Lentini VL. Neurogenic bladder and disc disease: a brief review. Curr Med Res Opin 2013; 5. Korse NS, Jacobs WC, Elzevier HW, Vleggeert Lankamp CL.