

4<sup>th</sup> World Congress on **PATHOLOGY AND CLINICAL PRACTICE**September 20<sup>th</sup>, 2022 | Webinar**Vesicle dysfunction and disc disease**

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Research has demonstrated that herniated intervertebral disc can cause several disturbances related to urination. Disturbance of the urinary bladder function occurs more as a consequence of the lesions of several nerves than the damage of only one nerve caused by disc lesions. The more numerous the disc lesions, the more serious is the disorder of bladder function. Difficulties of diagnosis arise especially in the occult type, but certain features are helpful in suggesting the condition and indicating the need for further investigation. As in any other neurological disease the symptoms and signs depend on the level of the lesion. The essential features of a classical prolapsed disc are due to pressure on a nerve root, lumbar lesions being more likely to affect the bladder than protrusions higher up the spinal column. Disturbances of bladder function, usually transient but occasionally persistent, may occur after operations for prolapsed intervertebral disc. Such postoperative urinary troubles have become uncommon with improvements in technique, such as the fenestration procedure. Of greater interest, and certainly of greater importance, are neural lesions due to a prolapsed lumbar disc causing bladder symptoms in patients with minimal or absent back or leg pain. Probably the usual disc lesion escapes the neural complications of bladder dysfunction as only one root is compressed. Vesical dysfunction is more likely to occur when the annularis is ruptured and the whole vertebral canal is filled by the nuclear mass or when there are multiple disc protrusions. The annulus is weaker posteriorly and its rupture allows the nucleus pulposus to protrude. Such disc lesions are commonly posterolateral in site, medial or massive central protrusions being less common. Some patients with disc lesions causing bladder dysfunction have been diagnosed as "hysterical" or their symptoms labelled as functional because of minimal physical signs," and it is probable that the condition is not uncommon.

**Biography**

Dr. Herion Dredha a medical doctor, surgeon urologist from Tirana, Albania. He graduated on 2000 from the Faculty of Medicine, University of Tirana, Albania. Afterwards he was specialized for four years in Urology and currently he work at the at the University Hospital Centre "Mother Teresa" in Tirana at urological department. Currently he is doing Phd in this domain at Tirana University, in Tirana - Albania.

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