



Уронет, 2/2024 ISSN 1312-1960

КОНГРЕСЕН БРОЙ

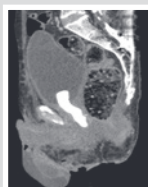
УРОНЕТ



**Робот-асистирани и
лапароскопски операции**



**Заболявания на горни пикочни
пътища**



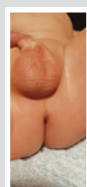
**Заболявания на долни пикочни
пътища**



Карцином на простатата



Заболявания на пикочния мехур



Детска урология

provided surgical treatment, preoperative risk factors, evaluation of preoperative approach and diagnostics, discussion regarding the benefit of the procedure performed, as well as our own experience and approach to dealing with complications and the follow-up.

CONCLUSION:

The described surgical technique has a good overall therapeutic effect and a satisfactory result regarding frequency and severity of postoperative complications compared to the described in literature other alternative surgical methods for the treatment of uncomplicated SUI up to this date.

THE ASSOCIATION OF SQUAMOUS KERATINIZING METAPLASIA (LEUKOPLAKIA) OF THE BLADDER WITH SYMPTOMS OF THE LOWER URINARY TRACT IN WOMEN

D. Markovski

CITY GENERAL HOSPITAL „8TH OF SEPTEMBER“ - SKOPJE, REPUBLIC OF NORTH MACEDONIA

INTRODUCTION:

Squamous keratinizing metaplasia (SCM) of the bladder, also known as leukoplakia of the bladder, is a condition in which the normal transitional epithelium is transformed into a squamous epithelium overlying a layer of keratin (1). In most patients, typical non-specific urinary symptoms are expressed, such as frequency, urgency, suprapubic pain, discomfort, microhematuria and, less often, macrohematuria (7).

OBJECTIVES OF THE STUDY:

- To prove the relationship between bladder leukoplakia and urinary symptoms in affected women.
- To determine the effect of endoscopic resection of leukoplakia in relation to conservative treatment

MATERIALS AND METHODS:

The study analysed 50 patients with long-term lower urinary tract symptoms (more than six months) between 2021 and July 2024. All underwent cystoscopy. The study included patients with a pathohistological diagnosis of squamous keratinizing metaplasia of the bladder. The severity of symptoms was determined according to the international classification for urinary symptoms (International prostate symptom score - IPSS). Bi-polar transurethral resection of

squamous keratinizing metaplasia of the bladder was performed in all patients. One month after the intervention, the patients were called for a follow-up examination, during which the severity of urinary symptoms was re-evaluated according to the IPSS. Then a comparative analysis was performed, on the basis of which the significant difference of IPSS before and after the intervention was assessed.

RESULTS:

Of the total number of female patients, lower urinary tract symptoms, pain and hematuria were the most common symptoms. After the intervention there was a significant improvement in the initial IPSS score. The percentage of patients with severe and moderate lower urinary tract symptoms decreased from 57.1% to 25.7%. No hematuria was reported, and most of the patients reported an improvement in their quality of life. A total of 64.4% of patients reported an improvement in symptoms, in 23.5% there was no improvement, and 12.1% reported worsening of symptoms.

CONCLUSION:

Bipolar transurethral resection significantly relieves symptoms in women with squamous keratinizing metaplasia, improves quality of life according to the IPSS questionnaire by an

acceptable 64.4%, and is superior to conservative treatment.

REFERENCES:

1. Markovik V, Urologija Tom 2. Novinarsko-izdavacka institucion Sluzben list SRJ. Belgrade 1997. Surgery mokracnih organs. Rare sick basically, pp. 885-892
2. Hussain SA, Alhalabi F, Zimmern PE. Long-term efficacy of fulguration of trigonitis for recurrent urinary tract infections in women. Urol Sci. 2015; 26:197 -201.
3. Al S, Schlechte H, Sachs M, Kristiansen G, Burkhardt M, Schnorr D. Clinical value of vesical leukoplakia and evaluation of the neoplastic risk by mutation analyzes of the tumor suppressor gene TP53. Int J Urol. 2006; 13: 1092-1097.
4. Lee KS, Yoo TK, Liao L, et al. Association of lower urinary tract symptoms and OAB severity with quality of life and mental health in China, Taiwan and South Korea: results from a cross-sectional, population-based study. BMC Urol. 2017; 17:108.
5. Benelli A, Varca V, Vaccaro C, et al. Keratinizing squamous metaplasia of the bladder: our experience and current approaches. Urologia. 2018; 3:391560318810197.
6. Ablove T, Bell LN, Liang H, Chappell RJ, Toklu HZ, Yale SH. The effect of solifenacin on postvoid dribbling in women: results of a randomized, double-blind placebo-controlled trial. Int Urogynecol J. 2018; 29:1051-1060.
7. McKenney JK. Precursor lesions of the urinary bladder. Histopathology. 2019; 74: 68-76.
8. Khan MS, Thornhill JA, Gaffney E, Loftus B, Butler MR. Keratinising squamous metaplasia of the bladder: natural history and rationalization of management based on a review of 54 years of experience. Eur Urol. 2002; 42: 469- 474.
9. Steven PP, Pinkstaff DM, Kevin JW, Kenneth JB. Leukoplakia of the bladder. Infect Urol. 2003; 16: 95-102.
10. Costantini E, Zucchi A, Del Zingaro M, Mearini L. Treatment of urethral syndrome: a prospective randomized study with Nd:YAG laser. Urol Int. 2006; 76: 134-138.
11. Grzech-Leśniak K, Sculean A, Gašpirc B. Laser reduction of specific microorganisms in the periodontal pocket using Er:YAG and Nd:YAG lasers: a randomized controlled clinical study. Lasers Med Sci. 2018; 33:1461-1470.
12. Rofeim O, Hom D, Freid RM, Moldwin RM. Use of the neodymium: YAG laser for interstitial cystitis: a prospective study. J Urol. 2001; 166: 134-136.
13. Connery DB. Leukoplakia of the urinary bladder and its association with carcinoma. J Urol 1953; 69:121-7. 10.1016/S0022-5347(17)68038-8