

# CYSTOSCOPY

## What is this and why am I having this procedure?

A Cystoscopy is one of the most common Urological procedures. It involves placing a telescope into the urethra and then the bladder to enable a detailed and complete assessment of the inner lining and structure of the bladder, but also of the urethra and the prostate.

A cystoscopy will often be recommended if you have/are experiencing:

- Blood in the urine,
- high suspicion for bladder cancer,
- abnormal urine cytology results,
- symptoms like burning, stinging, frequency, leakage,
- bladder outlet obstruction
- recurrent urinary infections
- formation of bladder stones
- stricture

If abnormal areas are seen, a biopsy may be taken at the same time.

A cystoscopy may also include dilatation, stone removal, revision TURP or other procedures as deemed necessary by the Doctor.

## Before the Procedure

If you are taking any medications these should be made known to Dr Bergersen who will assess whether they need to be stopped. Blood thinners such as **Warfarin, Plavix and Aspirin must be stopped one (1) week prior** to the operation and may be restarted ?? afterwards.

You must **fast (ie nothing to eat OR drink)** from midnight (if your procedure is in the morning) or from 7am (if your procedure is in the afternoon).

You will be asked to complete a urine culture test to ensure you are free of any urinary tract infection prior to the procedure.

If you are being operated on at the Sydney Adventist Hospital or North Shore Private, the hospital will call you the evening before to let you know what time you must arrive at Admissions on the day. If you are booked in to Hornsby Hospital you should contact the Hospital on 9477 9123 before the day to find out the time of your admission.

This procedure requires an anaesthetic. You will NOT be able to drive yourself home.

## During the Procedure

During a cystoscopy a thin flexible tube with a light and a camera lens is inserted into the urethra and up into the bladder, allowing the doctor to look at the inner lining of the bladder and check for any abnormalities or suspicious looking tissue. The doctor may also take a biopsy that can be examined more closely in a laboratory allowing an accurate diagnosis to be made.

### Cystoscopy and Removal of Bladder Stones

Bladder stones can form within the bladder in pockets called diverticulae, or because of bladder outlet obstruction like an enlarged prostate, or a urethral stricture, or in the context of recurrent urinary infection. These stones must be removed as they are a source of irritative voiding and are often the origin for recurrent infections. A cystoscope is passed per urethra with an instrument that can crush the stones, or alternatively a laser fibre can be used to fragment the stones. All stone fragments are then washed out of the bladder. The underlying reason for stone formation must also be addressed.