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Is there a better outcome for posterior urethral valve (PUV) presenting antenatally? A unicentre experience in 81 children

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Purpose: Posterior urethral valve (PUV) is a disease spectrum with varied presentation and prognosis, dependant to a large extent on pre-existing renal damage. Excluding those fetuses that are severely affected, early diagnosis and prompt intervention post-natally should theoretically be preventing further renal damage. With the uncertainty of outcome of fetal intervention, our aim should be to optimise treatment after birth. A series of 81 babies with PUV who presented antenatally is discussed here.

Methods: This is a 10 year retrospective record review of all operated cases of PUV detected antenatally from a tertiary care hospital. The outcomes analyzed were pertinent to renal function, voiding dysfunction and complications.

Results: Eighty four (42%) of 190 patients presented antenatally and 81 are included. The mean gestational age at diagnosis and intervention was 34 ± 4.5 weeks and 130.5 ± 170.9 days respectively. 70 (87%) were fulgurated and 11 had diversion. The nadir creatinine was significantly raised in babies who had oligohydramnios diagnosed in 2nd trimester and in those who were diverted. The data on follow up and continence in toilet trained patients are presented.

Conclusion: All boys with antenatally diagnosed hydronephrosis should be followed closely to rule out PUV. Endoscopic therapy should be the initial modality of treatment. In patients with preserved renal function, the prognosis is good if managed early. A nadir creatinine at 6 months of 0.8 mg/dl should be predictive of excellent prognosis. Early postnatal therapy preserves renal function and may prevent late bladder deterioration. Our results should be useful in counselling prospective parents with antenatally suspected PUV.

Biography

Satish Kumar Kolar Venkatesh has completed his Pediatric Surgery Training in the year 2006 from Mumbai, India and has worked as an Overseas Fellow for 2 years in Perth, Australia. After returning back to India, he has been practising as a Consultant in corporate hospitals and is engaged in clinical research/audits. He has presented more than 15 papers in national and international conferences and published more than 14 papers in reputed journals. He has special interest in embryogenesis of surgically correctable urological malformations in children.

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