

Cystoscopy

What Is A Cystoscopy?

This is a short investigation which will help detect the cause of your bladder symptoms. It is performed as a day case under general anesthesia.

It involves inserting a telescope (cystoscope), the size of a pencil, into the bladder. We can then look into the bladder to determine whether there is any abnormality of the bladder wall lining or muscle, as well as the urethra (the tube that connects the bladder to the outside), and if needed take small biopsies (see below).

The general anaesthetic is usually a very short one, and if all is well you can go home a few hours later.

What Is A Bladder Biopsy?

On looking at the bladder with the cystoscope, we may need to take a small sample of the bladder wall (biopsy) for further assessment. The biopsy is sent to the laboratory for examination.

What Is An OTIS Recalibration?

In patients who have difficulty emptying their bladder we may suggest doing a urethral dilatation / OTIS recalibration. This involves a cystoscopy as described above and then gently widening the urethra sometimes using a special instrument called an OTIS. This may help enlarge the urethra in those patients who have narrowing at this level and improve bladder emptying.

What Are The Complications Of This Procedure?

- You may experience:
- Some discomfort following these procedures when passing urine
- Urgency and a repeated sensation of wanting to pass urine, even when your bladder is empty
- Blood stained urine (generally only for a few days)

It is important to drink plenty of fluid to help 'wash' the bladder and prevent infection. If you are unable to pass urine it may be necessary to have a catheter (soft tube) into the bladder for 24 hours to rest it. You may need to stay in hospital with this.

Infection in the urine can occur after this procedure. All women get antibiotics at the time of surgery. If you are at particular risk we will give you antibiotics to take home. If you find that you are getting more pain passing urine or feel unwell, you should visit your Consultant's team or GP to request your urine is tested for infection and then antibiotics started if this is the case.

There is a very small risk of perforation (making a small hole) in the bladder. This does not cause long-term problems and will heal by itself. We will need to leave a catheter in for a few days and you will be given antibiotics.

It is important to that you are collected or accompanied home if you have a general anaesthetic. You should not drive/ride for at least 24 hours or operate machinery (including your cooker), since your concentration may be impaired due to the anaesthetic.

You should be able to continue everyday activities within a couple of days of the procedure.