# Complete Primary Repair of Exstrophy: Pitfalls and Practicalities

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### **Session Structure**

#### • Topic 1 Discussion:

- Goals of Complete Primary Repair of Exstrophy
- Pitfalls of CPRE

#### Case discussion:

- Case 1: near miss glans ischemia
- Case 2: Protocol change to address the near miss

#### Topic 2 Discussion:

- Utility/Futility of ureteral reimplant during CPRE
- Case Discussion:
  - Case 1: Cephalo-trigonal reimplants at time of surgery
  - Case 2: Delayed cephalo-trigonal reimplants

### Hendren Project Webinar Goals

- Audience participation!
  - Makes session more dynamic, interesting, and valuable
  - Participate in the *Question* polls--all answers are anonymous!
- Please use the COMMENTS & QUESTIONS box (located on the right side of the screen) to ask as many questions and to offer as many opinions as possible!

## Background: The Delayed Complete Repair

- CPRE described in 1998 by Mitchell
  - Closure of bladder
  - Reconstruction of bladder neck
  - Urethroplasty
  - Epispadias repair
- Goal:
  - Create appropriate bladder outlet resistance
  - Allow for normal bladder cycling from early age
  - Allow for optimal bladder growth and development

## Background – Concerns with CPRE

- Immediate concerns:
  - Dehiscence
  - Penile Ischemia → Glans/Corporal Injury
  - Balance between too tight and too loose (bladder neck)
- Later concerns:
  - High volume reflux
  - Persistent incontinence

## Question 1:

- How do you close a primary bladder exstrophy?
  - A. CPRE
  - B. Modern staged repair
  - C. Kelly procedure
  - D. Primary diversion (Mainz II)

## Question 2:

• What is your biggest concern during a CPRE?

- A. Bladder dehiscence
- B. Glans ischemia
- C. Urethral fistula
- D. Penopubic fistula
- E. Lack of bladder growth over time due to poor outlet resistance

Topic 1: Penile ischemia

## Early Experiences: Big Concerns

- Two dehiscences
  - both in boys without osteotomy
- Two glans/corporal injuries
  - one following separation
  - one in 6 month old with epispadias who had the symphasis split as part of the repair without osteotomy

### • Take aways:

- CPRE can be really dangerous
- Osteotomy is critical to safe closure

## Glans/corporal injury



Newborn with epispadias:

- Primary closure with epispadias repair
- No osteotomy
- Bladder neck reconstruction
- Complete dissassembly with anatomical closure



## Question 3:

- What do you do to prevent glans and corporal ischemia?
  - A. Don't close pubic symphysis
  - B. Posterior osteotomy
  - C. Anterior osteotomy
  - D. Leave a gap in pubis if there is sign of ischemia
  - E. Sprinkle papaverine on penis during closure

## "Be No" Event

- How to avoid the "Be No" Event
  - Keep Glans intact
  - Tempered closure of pubis
  - Incise glans to watch for bleeding
  - BE AWARE of the potential, and open the pubis if the glans appears dusky

## A Cautionary Tale

#### PUBIC CLOSURE DURING A COMPLETE PRIMARY REPAIR OF BLADDER EXSTROPHY

CHILDREN'S HOSPITAL OF PHILADELPHIA

Topic 2: CPRE with Bilateral Ureteral Reimplant

### The concurrent re-implantation

#### Cephalotrigonal technique

- Described by Canning and Jeffs in 1993
- Done at time of CPRE
  - Described by Braga and Pippi Salle in 2010



### **Concurrent CPRE-BUR outcomes**

**Table 2.** Outcome comparison between patients whounderwent CPRE with and without ureteral reimplantation

Variables	No. CPRE-BUR (%)	No. CPRE (%)	p Value
Postop hydronephrosis grade:			0.05
	2 (13)	3 (13)	
II		3 (13)	
III	—	3 (13)	
IV	—	1 (4)	
Postop febrile UTIs	1 (7)*	11 (48)	0.01
Postop VUR	0 (0)	17 (74)	0.004

\* Febrile UTI after voiding cystogram.

## Question 4:

- Do you do a ureteral reimplantation at the time of CPRE?
  - A. Yes
  - B. No
  - C. Depends on bladder size
  - D. Depends on bladder polyps

## The re-implant question

PRO	Con
<ul> <li>Allows bladder to cycle efficiently</li> </ul>	• Small bladder plate may not allow for long
<ul> <li>Avoids progressive ureteral dilation during cycling</li> </ul>	<ul> <li>Persistent reflux may occur</li> </ul>
<ul> <li>May prevent UTI's</li> </ul>	<ul> <li>Adds time to already long procedure</li> </ul>

BUR at CPRE – case for and against in Boy and Girl

Thank you for your participation!