Interim analysis of the POIROT trial: Post-Operative Imaging after urethroplasty with peri-catheter Retrograde urethrography Or Trial of voiding with voiding cystourethrography

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Introduction

- No clear standard about how to perform early postoperative imaging after urethroplasty: peri-catheter retrograde urethrography (pcRUG) or voiding cysto-urethrography (VCUG)?
- **Aim:** To directly compare pcRUG and VCUG as early postoperative imaging modalities after urethroplasty

Materials and methods

- Prospective within-patient comparison
- Practical:
  - pcRUG: 5 Fr feeding tube next to catheter
  - VCUG: 10 min later*

Results

- **N = 25:** all patients underwent pcRUG & 8 patients (32%) underwent no formal VCUG
  - 3/25 (12%): significant extravasation
  - 5/25 (20%): unable to void during exam
- No significant contrast extravasation on VCUG after negative pcRUG
- Median (IQR) radiation dose (mGy/cm²):  
  - pcRUG: 122 (73-143)
  - VCUG: 203 (172-307)

*if no significant extravasation

p < 0.001
CONCLUSION

These data suggest to prefer pcRUG over VCUG as early postoperative imaging after urethroplasty

- No loss of diagnostic yield
- Less radiation exposure
- Avoidance of patients being unable to void during examination