A Novel Technique for Bladder Tumour Fulguration
D Spernat, A Jay, C Ooi, N Parker

Citation

Abstract
Dear Editor,

Many techniques have been described for bladder tumour fulguration. These include electro-cautery electrode, roller ball diathermy and holmium laser. However, our institution has recently started to use a PTFE guide wire from Cook Medical™. Herein we describe our technique.

Small superficial bladder tumours regularly do not require biopsy of all lesions especially when there are multiple. Furthermore, in the day surgery setting, it can be advantageous to diathermy small biopsy sites. At our institution, our day surgery suite is not holmium laser safe, thus precluding the use of this modality. Moreover, we have very limited access to an electro-cautery electrode that will fit through the working channel in a 16 F flexible cystoscope.

As a result, we now use a 5 F open-ended ureteric catheter through the working channel and then pass a Cook Medical™ PTFE guide wire through the open-ended ureteric catheter. A standard hand held diathermy is applied to the PTFE wire for visual destruction of the lesion or haemostasis. The open-ended ureteric catheter helps to direct the wire for more precise diathermy application. Moreover, the ureteric catheter protects the flexible cystoscope from damage from the electrical current that is passing through the PTFE guide wire.

We find this technique safe, efficacious and cost efficient. Many other units will find this novel technique useful where holmium laser is either not available or suitable.

References
Author Information

Dan Spernat, M.B., B.S., FRACS (Urol.)
Consultant Urologist, The Queen Elizabeth Hospital

Alexander Jay, M.B., B.S.
Urology Registrar, The Queen Elizabeth Hospital

Chong Chien (John) Ooi, M.B., B.S., M.S., MBU, MRCS, FRCS (Urol.)
Urology Fellow, The Queen Elizabeth Hospital

Natalie Parker, BNsg
Urology Clinical Practise Consultant, The Queen Elizabeth Hospital