

AB115. 128. A 10-year review of genito-urinary injuries in pelvic and acetabular trauma

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Background: Urological trauma can be fatal and can lead to long-term disability. Eight percent of urological trauma is associated with pelvic fractures. The aim was to report the incidence of urological injuries in pelvic and acetabular (P&A) fractures and to investigate associations between P&A fractures and urological injury patterns. A further aim was to prospectively evaluate P&A referrals for adherence to British Orthopaedic Association Standards for Trauma (BOAST) guidelines over a 12-month period.

Methods: A retrospective review of urological injuries in P&A fractures was performed from January 2006–December 2016 in the national pelvic trauma centre. Patient demographics, mechanism and details of injuries were recorded. P&A referrals were prospectively monitored in 2016 and reviewed for adherence to guidelines.

Results: The incidence of urological trauma in P&A fractures was 2.4% (n=28/1141). Median patient age was 45 years (range, 19–85 years) and the M:F ratio was 2.1:1. The most common injury was urethral (n=15, 53%), followed by bladder (n=11, 36%) and kidney (n=5, 18%). Bladder and urethral injuries were associated with high-energy pelvic trauma. Renal injuries were associated with acetabular fractures in isolation and in combination with pelvic trauma (P=0.01). In 2016, there were 176 P&A referrals of which 19 patients had suspected urotrauma (n=5, visible haematuria; n=2, non-visible haematuria; n=11, trauma imaging); of which 47% (9/19) had no urological investigations performed.

Conclusions: Urological injuries in P&A trauma may be underreported due to inadequate evaluation, and diagnostic investigations in these patients. We advocate guideline-based evaluation of urological injuries in P&A trauma to avoid the significant long-term morbidities associated with misdiagnosis.

Keywords: Pelvic; trauma; urological; injury

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