

AB170. Retrospective analysis on the indications for flexible cystoscopy and outcome of red patch biopsy

Saurabh Verma¹, Gauri Chillarge², Sakun Ale³,
Nikita Bhatt³, Gautam Kumar Banerjee³

¹Department of General Surgery, Antrim Area Hospital, Antrim, County Antrim, Ireland; ²Department of Colorectal Surgery, Addenbrookes Hospital, Cambridge, UK; ³Department of Urology, Ipswich Hospital, Ipswich, UK

Background: Despite being a useful investigative tool for visible haematuria and assessing bladder cancer recurrence, there is controversy around the diagnostic merits of using cystoscopy in recurrent urinary tract infections (UTIs), lower urinary tract symptoms (LUTS) and non-visible haematuria (NvH).

Methods: All patients that had or were due to undergo cystoscopy between January 2019 to March 2019 was retrieved. The reason for these referrals and cystoscopy findings were tabulated. Further retrospective analysis was performed, investigating patients that had undergone biopsies following cystoscopies from August 2018 to January 2019. The reasons for referrals and biopsy results

were tabulated.

Results: A total of 983 patients that initially underwent cystoscopies from January 2019 to March 2019. A further 1,885 patients underwent cystoscopies from August 2018 to January 2019, from which 100 had biopsies. Red patch and suspicious areas were identified on initial cystoscopy for patients with LUTS (8/144), NvH (11/181) and recurrent UTIs (6/129) in a small number of patients. Patients with LUTS NvH and recurrent UTIs that had biopsies due to red or suspicious areas had 0% positivity rate for malignancy. Majority of findings on cystoscopy for LUTS (51/144), NvH (46/181), recurrent UTIs (27/129) groups were nonspecific changes that would not require surgical intervention (bladder debris, bladder diverticulum, occlusive prostate, etc.).

Conclusions: Nearly a third of flexible cystoscopies in this unit are performed for LUTS or recurrent UTIs, with findings requiring further intervention in a very small proportion. Biopsy of red patch may not be as useful in patients with recurrent UTIs, LUTS or non-visible haematuria.

Keywords: Cystoscopy; recurrent urinary tract infections (UTIs); lower urinary tract symptoms; biopsy; urology

doi: 10.21037/map.2020.AB170

Cite this abstract as: Verma S, Chillarge G, Ale S, Bhatt N, Banerjee GK. Retrospective analysis on the indications for flexible cystoscopy and outcome of red patch biopsy. *Mesentery Peritoneum* 2020;4:AB170.