Persistent Vesicourethral Anastomotic Leak After Laparoscopic Radical Prostatectomy: Laparoscopic Solution

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Objectives: To describe our experience with laparoscopic reintervention for persistent vesicourethral anastomotic leak (PVAL) after laparoscopic radical prostatectomy (LRP). PVAL after LRP is an unusual complication. Surgical repair is uncommon but can be done safely through the laparoscopic approach. Methods: From 2000 to 2006, 391 patients were treated with LRP performed by a single surgeon. Four patients presented with PVAL and conservative treatment was initially indicated.

Owing to failure of the initial management, 4 patients underwent reoperation using a laparoscopic approach for PVAL at 5-12 days. Results: The vesicourethral anastomosis was endoscopically repaired using intracorporeal sutures. Four procedures were performed, 2 extraperitoneal and 2 transperitoneal, without any complications. The patients were discharged 4-6 days after reintervention. Follow-up has shown adequate results in these 4 patients. Conclusions: The results of our study have shown that when conservative