

Ultrasound in continence

Diagnostic use and more



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I work as pediatric urologist in the UMC Utrecht and I have no disclosures



LUTS symptoms ?

At intake for urinary incontinence there is a screening for different causes of the LUTS symptoms (eg. Incontinence).

After intake/screening most patients start with urotherapy

not succesfull patients are referred to urology: a delay of 6 months up to 2 years

Can we improve first screening and shorten delay?

And How?





Diagnostical use for incontinence / LUTS intake,

Teaching / explaining parents and children the anatomy

Showing the action: Tool for biofeedback







US Diagnostics in LUTS

Kidney double collecting systems / mega-ureter

Bladderwall: diverticulum Stone tumor ureterocele

Rectum filling +/diameter consistency of stool











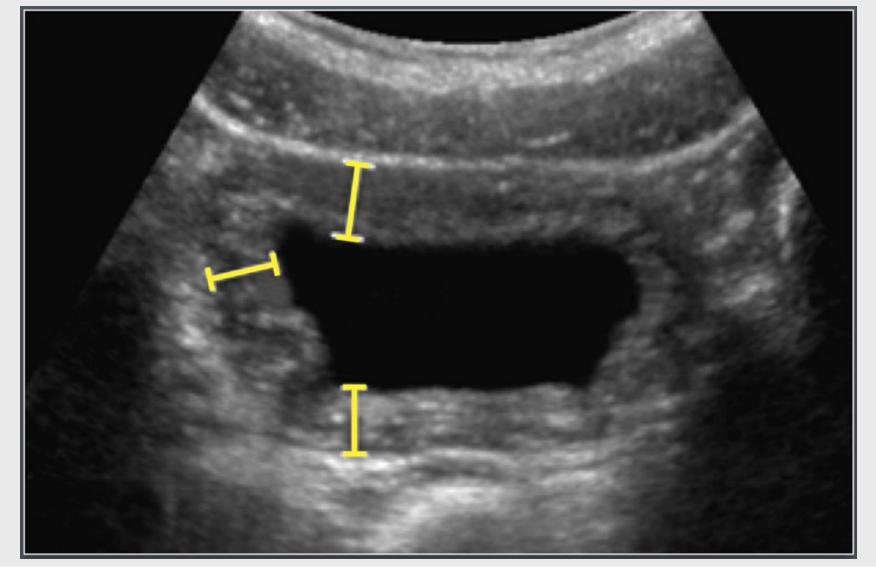
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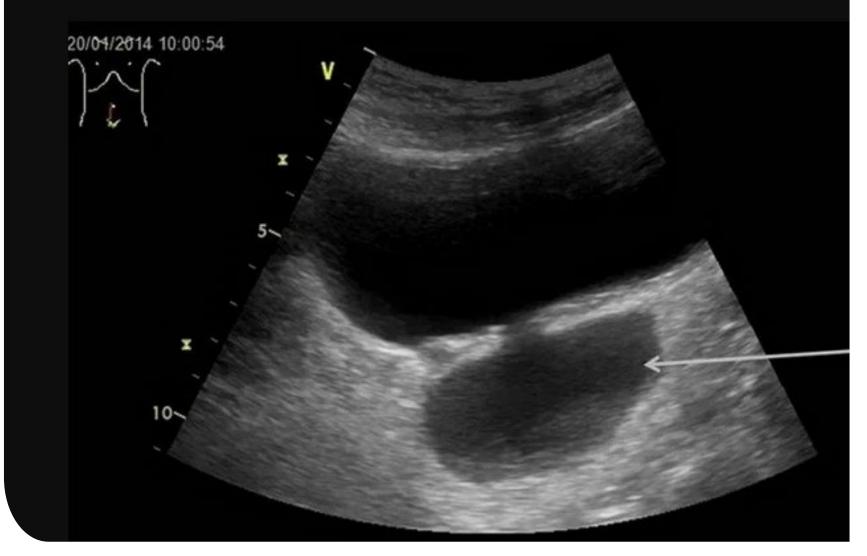
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Thick bladderwall : OAB? obstruction? Large Volumes?





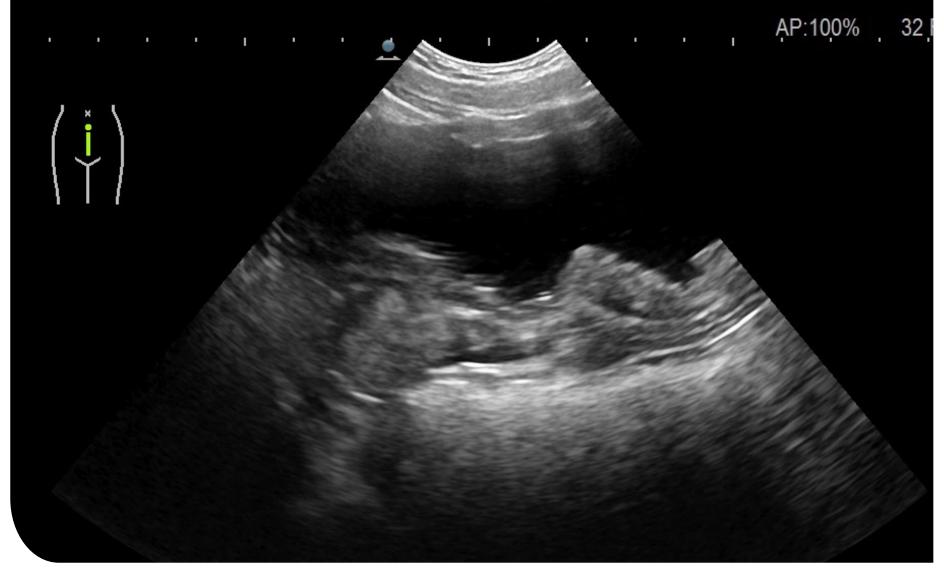
Diverticulum: chronic residu, infections, voiding pressures?





Stone: LUTS symptoms ++ , has many causes





Tumor: can give LUTS symptoms





Ureterocele: can give LUTS sympoms, mostly linked to double systems



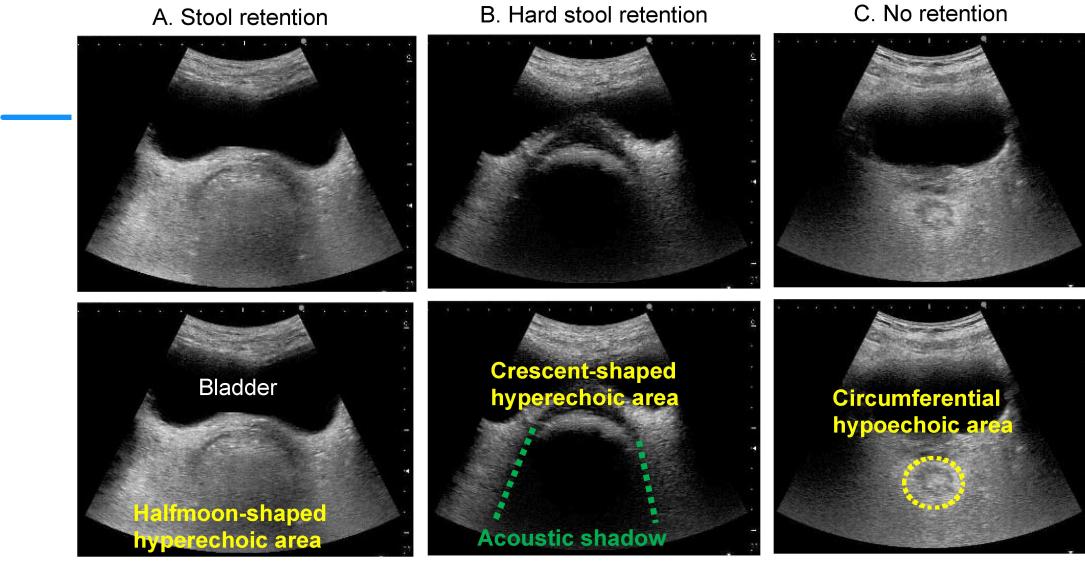
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US: Perineal view in sagital images

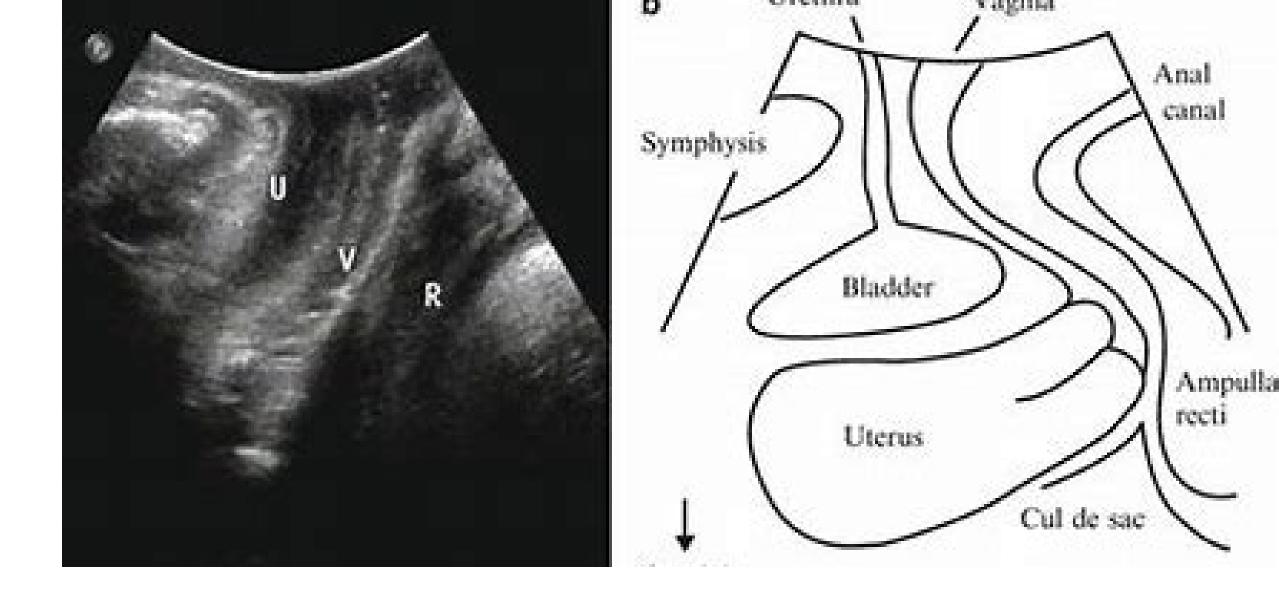
On perineum or against the Vulva in a sagital plane, lots of warm GEL

Urethra: Length from bladder to pelvic floor Direction of the stream? bladderneck?: position / closed?

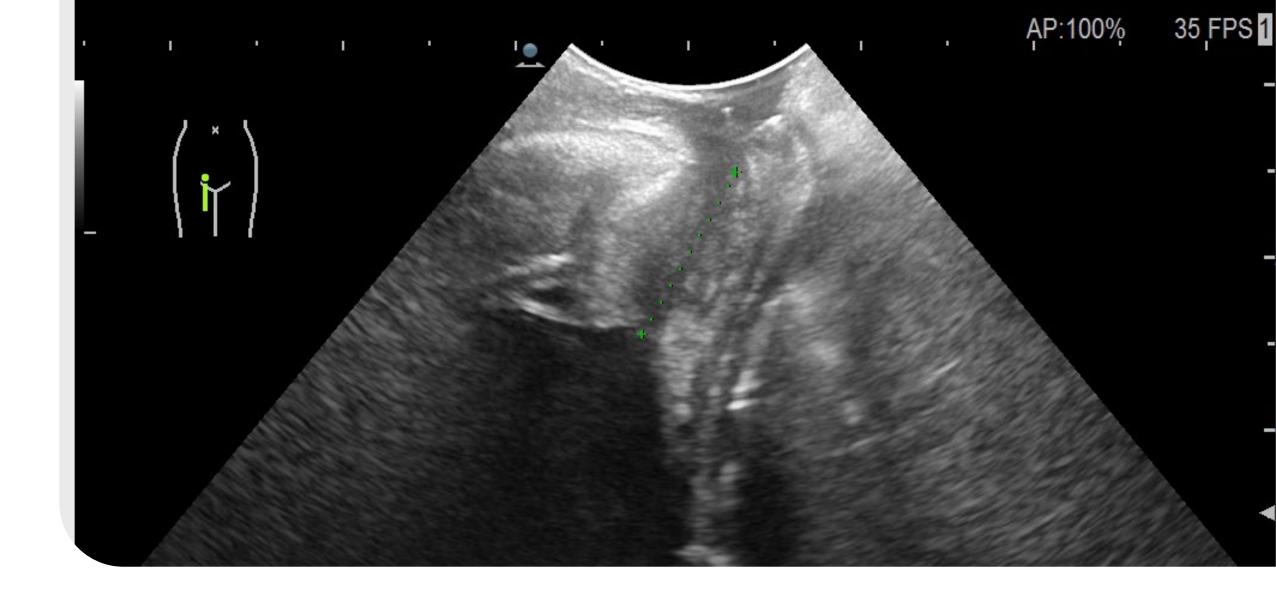
Other Pelvic views reflex of puborectalis: cough Straining/valsalva

Explain anatomy and functions in VIVO











US: What else?

Pelvic views reflex of puborectalis: cough Straining/valsalva

Explain anatomy and functions in VIVO

Holding manouvre

(result of) Activation of pelvic floor muscles is a perfect option for teaching and biofeedback

Perineal or abdominal?











US: SPI? Tool for biofeedback

Sagital Perineal Imaging

access for biofeedback (in selected patients)

feasibility ? with a wireless ultrasound probe with an I-pad/Iphone as screen?

BUT: First develop a protocol and proper evaluation for this SPI TOOL



