Holmium laser endopyelotomy for ureteropelvic junction obstruction in children

Record Status
This is a bibliographic record of a published health technology assessment. No evaluation of the quality of this assessment has been made for the HTA database.

Citation

Authors' conclusions
Ureteropelvic junction obstruction (UPJO) is defined as a functional and anatomical obstruction of urine flow from the renal pelvis into the proximal ureter that if untreated leads to hydroureteronephrosis (enlargement of kidney and ureter). The condition may be congenital or acquired in adulthood. Patients with acute and serious symptoms of UPJO, such as back or flank pain, progressive deterioration of ipsilateral renal function, impairment of overall renal function, infection, or the development of kidney stones, may need surgery. The primary goal of surgical intervention is to preserve renal function and provide symptom relief. Open pyeloplasty is the standard of care for UPJO with success rates over 90%; however, it is associated with pain and prolonged hospitalization. Technological advances in urology have led to the development of minimally invasive, laparoscopic and endoscopic approaches, which result in shorter hospitalizations, reduced morbidity, and faster recovery. These minimally invasive techniques may be applicable in children with UPJO.

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