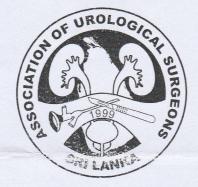
TOGETHER TOWARDS TOMORROW



SLAUS 2018

THE SRI LANKA ASSOCIATION OF UROLOGICAL SURGEONS

13" NNUAL CADEMIC SESSIONS

COLOMBO



Methods

Using food coloring, disposable gloves were used to make balls with 5 mm diameter. They were set at different levels in gelatin filled 1000 ml normal saline bottles which resembles the kidney. A web camera mounted on a semicircular metal rod scavenged from a clothes rack was used as improvised C-arm x-ray system. Connected to a laptop, the images received served as negatives of real images from a C-arm. Targets were punctured with a lateral approach using a puncture needle by looking at the screen which gives a 2D image similar to the c-arm By moving the web camera, the depth picture. was observed. Color leakage perception indicates puncture.

2018

Results

Urologists and trainees from Sri Lanka, UK, UAE, China, Pakistan, Algeria and Ethiopia were given models and questionnaires consisting of realistic effect (Scale 0 - 10), difficulty in puncturing (0 -10), and practicality intraining (Yes / No).

Total participants: 173, Realistic effect: Mean 7, Difficulty: Mean 8, Trainability: Yes - 94%

Conclusions

The model could be used for training PCNL technique at a very low cost, in a realistic and safe manner.

PRESENTATION 17

Management of renal malignancies in von Hippel Lindau syndrome: A study of five cases

Thilakarathna S, <u>Kumara MGSR</u>, Gunasekara PD, Ambegoda ALAMC, Balagobi B, Epa WA, Abeygunasekera AM

Department of Urology, Colombo South Teaching Hospital, Sri Lanka

Introduction

Von Hippel Lindau (VHL) syndrome is characterized by haemangioblastomas of the central nervous

system and retina and multiple visceral tumours, commonly manifest as renal cell carcinomas (RCC), pheochromocytomas, pancreatic tumours and cystadenomas in epididymis or broad ligament. Management of bilateral, multiple RCCs in patients with VHL is challenging and must be weighed between preservation of renal function and adequate oncological clearance.

Methods

Five patients from four families with VHL syndrome treated at the Urology Unit of the Colombo South Teaching Hospital between 2013 January to 2018 October were retrospectively analyzed.

Results

Five patients from four families had bilateral renal tumours. Four were men. Mean age was 31. Three of them had multifocal renal tumours bilaterally and other two had unilateral multifocal tumours. Four patients had a family history and all patients had either haemangioblastoma of the brain or retinoblastoma or both. One patient underwent radical nephrectomy and partial nephrectomy of other side. He had temporary renal impairment post operatively requiring hemodialysis for three weeks. Two patients underwent bilateral nephron sparing surgery (NSS). Next two patients had one sided NSS and radio frequency ablation (RFA) of the other side. Three patients developed small renal lesions during follow up and underwent RFA successfully. All patients have a serum creatinine value less than 2 mg/dl and are tumour free at present.

Discussion and Conclusion

VHL Patients with bilateral renal tumours can be managed with a combination of NSS and RFA. This preserves the renal functions and avoid the invasive renal replacement therapy with transplantation while achieving good cancer control.