
Urodynamics/Video-Cystometrogram

(pressure tests on the bladder)

Filling of the bladder through a catheter and recording of the bladder response to filling.

This patient information leaflet is drawn from the consensus panels of many worldwide urological societies, as a supplement to any advice that you may already have been given. Alternative treatments are outlined below and can be discussed in more detail with Dr Campbell.

What are the alternatives to this procedure?

Observation, treatment without the information that this test might produce.

Before the procedure

Please be sure to inform the Urodynamics Department if you have any of the following:

- ~ An artificial heart valve
- ~ A coronary artery stent
- ~ A heart pacemaker or defibrillator
- ~ An artificial joint
- ~ An artificial blood vessel graft
- ~ A neurosurgical shunt
- ~ Any other implanted foreign body
- ~ Medications for your bladder symptoms
- ~ Blood thinning medications, particularly:
 - ~ Asasantim
 - ~ Aspirin
 - ~ Fish Oil
 - ~ Iscover
 - ~ Persantin
 - ~ Plavix
 - ~ Warfarin

If you feel that you might have a urinary tract infection please contact Dr Campbell's Practice on (07) 3367 1608 and inform him of the problem as the procedure will be unable to be performed if you have a urine infection.

An iodine-based solution is used to fill your bladder. Please contact the Urodynamics Department rooms prior to the study if you are allergic to iodine or seafood.

Where do I go for my procedure?

This procedure is performed at The Queen Elizabeth II Jubilee Hospital. The Urodynamics Department is located on the second floor of the QEII Hospital next to the emergency department.

Do I need to do anything special before my procedure?

You need to drink 1 litre of water 1 hour prior to your appointment. Should you feel that you are unable to travel with a full bladder, we ask that you arrive 1 hour prior to your appointment so we can give you the water when you arrive.

During the procedure

In adults, the procedure is normally performed with the aid of a small amount of local anaesthetic gel passed into the urethra (water pipe). The test will be performed by a specialist nurse and Dr Campbell and takes approximately 1 hr to complete if your bladder is full on arrival. These studies are conducted as an outpatient procedure so unless you have been told otherwise you will be able to leave when your procedure is completed. On arrival in the department, if you are able to urinate, you will be asked to pass urine into a device called a flow-rate machine.

Afterwards you will be asked to change into a hospital robe and be escorted to the radiology department where the procedure will take place. You will be positioned comfortably on an x-ray table and two small tubes inserted, one into the urethra (water pipe) and the other into the anus (back passage). After the tubes have been inserted, your bladder may be emptied and the tubes connected to the measuring apparatus.

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During the test, your bladder will be filled slowly with water and dye at a measured rate. You will be asked to cough and strain at intervals and to tell us when you first feel the desire to pass urine. You will then be encouraged to hold on until your bladder feels quite full. At various times during the procedure an X-ray picture of your bladder will be taken. If one of your symptoms is leakage of urine, we will try to reproduce this so that we can see what the bladder is doing when the leakage occurs. Patients often feel this embarrassing. Please be reassured that it is an important part of the test and that we will do all we can do to be as supportive as possible during this process. The procedure itself should not be painful but some people may find it uncomfortable.

Immediately after the procedure

When the procedure has been completed, you will again be asked to pass urine into the flow rate machine. The tubes will then be removed and you will be able to shower and dress while the results of your test are being analysed. Your results will be discussed and it will be decided what action is needed to improve your symptoms.

Although you will be able to drive it is recommended that you have someone else to drive you home. When you go home, we would like you to drink plenty of fluids for the next 24–48 hours in order to flush your system through. If you do experience ongoing stinging or burning when passing urine we suggest that you purchase a packet of ural sachets from your local pharmacy and take one three times a day. This should improve after 24–48 hours and is due to a small amount of irritation caused by the catheter.

Are there any side-effects?

Most procedures have a potential for side-effects and these are outlined below. Please use the check circles to tick off individual items when you are happy that they have been discussed to your satisfaction.

Common (greater than 1 in 10)

- Discomfort on passing urine
- Bloodstained urine

Occasional (between 1 in 10 & 1 in 50)

- Urine infection
- Inability to pass urine (retention of urine), requiring temporary insertion of a catheter
- Inability to pass the catheter into the bladder, requiring further investigation

Rare (less than 1 in 50)

- Failure to give a definitive diagnosis, sometimes requiring that the test be repeated

What should I expect when I get home?

When you get home, you should drink twice as much fluid as you would normally for the next 24–48 hrs to flush your system through. You may find that, when you first pass urine, it stings or burns slightly and it may be lightly bloodstained. If you continue to drink plenty of fluid, this discomfort and bleeding will resolve rapidly. Ural is a suitable agent to help relieve any discomfort

What else should I look out for?

If you develop a fever, severe pain on passing urine, inability to pass urine or worsening bleeding, you should contact Dr Campbell's Practice on (07) 3367 1608, or your family doctor since you may require treatment with antibiotics and/or the temporary passage of a catheter. For after hours emergencies Dr Campbell can be contacted on (07) 3367 1608.

The Wesley Hospital Emergency Centre (07) 3232 7333, and The Greenslopes Private Hospital Emergency Centre (07) 3394 7111 are other resources that are also available.

Are there any other specific points?

You will normally be asked to make a follow-up appointment after the test to discuss any further treatment. Additional or alternative treatment may, however, be recommended at the time of the test. A urodynamics test may not give a definitive diagnosis for your symptoms. Some patients need to have further studies before a definitive diagnosis and treatment plan can be agreed upon.

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Who can I contact for more help or information?

Dr Peter Campbell

Suite 9, level 9, Evan Thomson Building, The Wesley Hospital,
Chasely St,
Auchenflower, QLD 4066
(07) 3367 1608,
www.campbellurology.com.au

The Wesley Hospital, Urology Ward

451 Coronation Drive,
Auchenflower, QLD 4066
(07) 3232 7168
www.uhc.com.au/wesley

The Wesley Emergency Centre

451 coronation Drive,
Auchenflower, QLD 4066
(07) 3232 7333

Greenslopes Private Hospital, Continence Advisor

Newdgate St,
Greenslopes, QLD 4120
(07) 3394 7978
www.greenslopesprivate.com.au

Greenslopes Private Hospital Urology Ward

Newdgate St,
Greenslopes, QLD 4120
(07) 3394 7261
www.greenslopesprivate.com.au

Greenslopes Private Hospital Emergency Centre

Newdgate St,
Greenslopes, QLD 4120
(07) 3394 6777
www.greenslopesprivate.com.au

**The Queen Elizabeth II Jubilee Hospital,
Urodynamics Department**

Kessels Rd,
Coopers plains, QLD 4108
(07) 3275 6346

American Urological Association Foundation

1000 Corporate Blvd, Suite 410,
Linthicum, MD 21090
1800 828 7866
www.urologyhealth.org

Thank you for taking the trouble to read this information sheet. If you are satisfied with the explanation of the test, please sign below and this leaflet will be filed in your chart.

If you wish to retain a copy for you own records, one will be provided.

I have read this information sheet and I accept the information it provides.

Signature

Date
