

Transcript What is Cystoscopy Elise De MD

In this video we're going to talk about the urologic diagnostic procedure "Cystoscopy". Many of our patients will show up for the procedure saying they couldn't sleep at all the night before because they were so worried - and then at the end they say it really wasn't as bad as they expected. So let's tell you what happens - how to prepare for the study, if you do have discomfort how to manage that afterwards, and also why we do the test - what we're looking for.

Urologists gynecologists and their staff are used to getting people through cystoscopy and they will be able to guide you as to how to be comfortable during the procedure.

If you've been booked for cystoscopy this is usually a reason for optimism because you're about to find out what's causing your symptoms or to be reassured that something is not terribly wrong

This is a typical room in which we perform cystoscopy/ There's almost always a lovely technician like Kysha helping with the procedure to make you comfortable.

The cystoscope can look intimidating at first but if you look at the tip it's actually just the size of a standard urinary catheter. This model represents your bladder. We prepare the surface by cleaning and can insert a numbing gel. When we put the camera into the urethra it passes just as a catheter would - smoothly with lubricant gel. It's flexible to make it more comfortable, and also so we can see all aspects of the bladder being careful not to miss anything on cystoscopy.

When the camera is passed, if you take a nice deep breath this will relax the sphincter making the procedure more comfortable.

As your doctor is looking for problems visible to the camera you can look alongside with him or her. We start inside the urethra (the tube from the bladder to the outside world). We can see scarring, which is a stricture similar to a block in a pipe caused by prior infection surgery or injury. We can see connections to a little pouch alongside the urethra called the urethral diverticulum or to a fistula which is a connection to another organ. In men, we can see if the prostate is blocking the urine flow and in all genders we can see if the bladder neck is tight. We can then see inside the bladder. There might be a stone, a tumor, or inflammation, either from an infection or irritation from an inflamed organ next to the bladder. Signs of wear and tear can be visible. When the muscles been working hard and muscle bulk builds up that is called trabeculation.

This image is an example of inflammation of the bladder consistent with a Hunner's ulcer. We see this in people who have interstitial cystitis. The lesion is treatable and treatment can lead to improved pain.

Risks of cystoscopy are really low. Typically we worry about urinary tract infection, a little bleeding, urethral irritation, and not much more. If a stretching of the urethra called dilatation or a biopsy of the bladder is required, the risk of bleeding might be slightly higher. It's important to tell your doctor if you're on blood thinners. Please keep in mind these risks are low and you will have the opportunity to talk to the staff about the procedure before it starts.

Unless you're having your cystoscopy in the operating room where you're going to be having anesthesia, you should be able to eat normally prior to the procedure. It's important to eat breakfast or lunch and to make sure that you don't get hungry if the doctor is running late - so bring a snack. If you haven't had enough to eat you might be more likely to feel light-headed at the time of the study.

To make sure you're comfortable the day of the test, if you have any particular desires just let the team know. For example, if you really don't want them to show you what's going on just tell them. If you've had a bad experience, for example with a prior procedure, communicating this will alert the team that you may be particularly sensitive and it will make you feel more in control. These are professionals who are trained to make you feel comfortable during sensitive procedures and it's not likely to be as bad as you think anyway.

Before the test, you can take Tylenol™. That medication won't affect bleeding. It also will take the edge off the discomfort. After the study if you're experiencing any discomfort you can take a medication called Azo™, which is Phenazopyridine. It's available over the counter. It should not be taken prior to the test as it can affect the diagnostic findings. It's a urinary anesthetic and it will turn the urine orange - so if you have incontinence, beware of staining. As with any over-the-counter medication it's important to let your pharmacist know that you're going to be taking it.

If you have serious concern that you won't be able to tolerate the test that most people even people with pelvic pain are able to tolerate you could ask your primary care physician to provide a prescription for a benzodiazepine or another relaxing medication. It is important to arrange to arrive 30 minutes early and sign the consent for the procedure before taking this medication - and you cannot drive on it.

Sometimes patients will ask if they can be put under anesthesia for urologic testing. Very occasionally we will perform cystoscopy under anesthesia in the setting of complex anatomy, a severe trauma history, or severe pain. The vast majority of our patients even those who have urologic pain do okay with the measures we've talked about, avoiding the increased cost, risk, and inconvenience of going to the operating room.

If you're really worried about having the procedure done, you can talk to your primary care doctor or even a psychologist who is used to fears about medical issues in order to prepare for the procedure. We want to make sure that fear is not an obstacle for your receiving the care that you need.

We hope this video helps you get ready for your cystoscopy. Remember, this procedure can be the key to unlocking your symptoms, finding important diagnoses and helping you improve your discomfort or pain.

If you have urologic pain there's more information at www.facingpelvicpain.org