

**Dansk Urologisk Selskab**  
**Abstract formular**

Teksten inden for rammerne startes med foredragets titel (STORE BOGSTAVER). I ny linie skrives forfatternavne (almindelige typer), som understreges, efterfulgt af oprindelsesafdeling og institution. Hvert abstract må ikke fylde mere end ét manuskriptark, inklusive eventuelle figurer og litteraturreferencer. Det bedes i ledsagebrev angives om arbejdet har været præsenteret på andre møder/kongresser.

Skriv inden for den sorte ramme, helt ud til begge sider og med enkelt linieafstand.

Our 100 first cases of retroperitoneal laparoscopic Anderson-Hynes operations

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**Purpose:** To examine the long term outcome of patients operated for genuine ureteropelvic junction (UPJ) obstruction with laparoscopic Anderson-Hynes operation at two institutions between January 2001 and July 2008.

**Materials and Methods:** A total of 100 retroperitoneal pyeloplasties were performed and results were evaluated in regard to an objective outcome measured by differential renal function (DRF) and a subjective outcome measured by loss of pain postoperatively. Furthermore results were evaluated according to remaining pain and reinterventions during the follow-up period.

**Results:** Operation was performed in 52 male and 48 female patients with a mean age of 35 years. Main reason for referral was pain (88%). The mean operation time was 197 minutes. 93 operations were performed as dismembered operations. Two open conversions were required. 81% had an uncomplicated operation with no early complications. A total of 20 reinterventions (20%) occurred during the first postoperative year of which 2 were open operations. One patient had an open operation 25 months postoperative. 12 months postoperative renograms were performed in 46 patients. Of those DRF was improved in 14 (30%) and decreased in 4 (9%). 12 months postoperative 18 patients of 77 (23%) had complaints regarding recurrent symptoms. In 68 patients followed up for more than 24 months 8 (12%) had complaints regarding recurrent symptoms.

**Discussion:** The laparoscopic Anderson-Hynes operation is found to be a good and feasible treatment of genuine UPJ-obstruction. The rate of reinterventions is relatively high (20%), but the reinterventions are relatively minor (balloon dilations, endopyelotomies, ESWL etc.). The complication rates found in our material are comparable to other similar studies.