1. Record Nr. UNINA9910780783003321

Autore Reynard John

Titolo Oxford handbook of urology [[electronic resource] /] / John Reynard,

Simon Brewster, Suzanne Biers

Oxford: New York,: Oxford University Press, 2006 Pubbl/distr/stampa

9786613893222 0-19-156695-0

1-283-58077-2

Descrizione fisica 1 online resource (699 p.)

Collana Oxford medical publications

Oxford handbooks series

Altri autori (Persone) BiersSuzanne

BrewsterS (Simon)

616.6 Disciplina

**ISBN** 

Soggetti Urinary organs - Diseases

Urology

Lingua di pubblicazione Inglese

**Formato** Materiale a stampa

Livello bibliografico Monografia

Description based upon print version of record. Note generali

Nota di bibliografia Includes bibliographical references and index.

Nota di contenuto Contents; 1 General principles of management of patients;

> Communication skills: Documentation and notekeeping: Patient safety in surgical practice; 2 Significance and preliminary investigation of urological symptoms and signs; Haematuria I: definition and types; Haematuria II: causes and investigation; Haemospermia; Lower urinary tract symptoms (LUTS); Nocturia and nocturnal polyuria; Loin (flank) pain: Urinary incontinence: Genital symptoms: Abdominal examination in urological disease; Digital rectal examination (DRE); Lumps in the

groin; Lumps in the scrotum; 3 Urological investigations Urine examinationUrine cytology; Prostatic specific antigen (PSA); Radiological imaging of the urinary tract; Uses of plain abdominal radiography; Intravenous urography (IVU); Other urological contrast studies; Computed tomography (CT) and magnetic resonance imaging (MRI); Radioisotope imaging; Uroflowmetry; Post-void residual urine volume measurement; Cystometry, pressure flow studies, and videocystometry; 4 Bladder outlet obstruction; Regulation of prostate growth and development of benign prostatic hyperplasia (BPH):

Pathophysiology and causes of bladder outlet obstruction (BOO) and

## **BPH**

Benign prostatic obstruction (BPO): symptoms and signsDiagnostic tests in men with LUTS thought to be due to BPH; Why do men seek treatment for their symptoms?; Watchful waiting for uncomplicated BPH; Medical management of BPH: alpha blockers; Medical management of BPH: 5 -reductase inhibitors; Medical management of BPH: combination therapy; Medical management of BPH: alternative drug therapy; Minimally invasive management of BPH: surgical alternatives to TURP; Invasive surgical alternatives to TURP; TURP and open prostatectomy

Acute urinary retention: definition, pathophysiology, and causesAcute urinary retention: initial and definitive management; Indications for and technique of urethral catheterization; Indications for and technique of suprapubic catheterization: Management of nocturia and nocturnal polyuria; High pressure chronic retention (HPCR); Bladder outlet obstruction and retention in women; Urethral stricture disease; 5 Incontinence: Classification: Causes and pathophysiology: Evaluation: Treatment of sphincter weakness incontinence: injection therapy Treatment of sphincter weakness incontinence: retropubic suspensionTreatment of sphincter weakness incontinence; puboyaginal slings; Treatment of sphincter weakness incontinence: the artificial urinary sphincter; Overactive bladder: conventional treatment; Overactive bladder: options for failed conventional therapy; 'Mixed' incontinence; Post-prostatectomy incontinence; Vesicovaginal fistula (VVF); Incontinence in the elderly patient; 6 Infections and inflammatory conditions; Urinary tract infection: definitions, incidence, and epidemiology: Urinary tract infection: microbiology Lower urinary tract infection

## Sommario/riassunto

This book provides a comprehensive summary of urological disease and its management in a concise form. While the description of urological conditions is comprehensive, the emphasis is on the practical approach to the conditions which are likely to be encountered. The significance and appropriate management of common symptoms is described, providing on a single page, a summary of the essential approach to a specific presenting complaint, be that haematuria, scrotal pain or bedwetting. - ;Approximately 20% of all surgical operations and a similar percentage of surgical emergencies are urological