

Bladder lithiasis of the child revealed by a rectal prolapse

Ondima LIP, Ondongo Atipo M, Ondziel Opara SA, Mboutol-Mandavo C, Massamba-Miabaou D, Moyikoua R, Mawandza PDG, Service YM, , PA Oko, Miguel LM, Mieret JC, Okiemy Niendet CP, Ossete GC, Odzebe AWS, Bouya AP*
Pediatric Surgery Department (CHU-Brazzaville Congo)

Abstract: Urinary lithiasis is a frequent and recurrent pathology, uncommon in children, most often affecting the upper urinary tract, and can develop in the bladder. The most frequent modes of disclosure are emergency situations (obstructive pyelonephritis, hyperalgesic renal colic, anuria on calculus), abdominal or pelvic pain, urinary infection, micro/macroscopic hematuria and finally, the fortuitous discovery of a calculus on an unprepared abdomen or a bladder ultrasound. Rectal prolapse is a mode of revelation not found in Western literature.

Objective: To make the standard pelvis x-ray interesting in front of any anal prolapse in children.

Patients and methods: This is a retrospective cross-sectional study involving 8 patients between January 2014 and March 2020 operated on in the Department of Pediatric Surgery of Brazzaville University Hospital. All children operated on for bladder lithiasis revealed by rectal prolapse were included.

Results: The average age of patients was 3 years (2-7 years), with males predominating in 87.5%. The reason for consultation in all cases was a hyperalgesic rectal prolapse (100%) associated in 40% of cases with abdominal pain and/or dysuria and acute urine retention. For all patients a standard radiograph of the pelvis was taken, showing a bladder stone. The treatment was surgical and consisted of a bladder lithotomy. The stone was voluminous and embedded in the cervix. We performed an anal cerclage for 1 patient at D2 post-operatively. The postoperative follow-up was simple and the evolution towards spontaneous regression of the prolapse. No recurrence was noted. Biological analysis was performed for 4 patients and showed a hyperoxaluric calculus (50%) and a phosphocalcic calculus (50%).

Conclusion: The interest of performing a pelvis radiography in front of any anal prolapse of the child allows to highlight a pathology whose diagnostic delay could have serious repercussions.

Keywords: Prolapse - Rectum - Bladder - Radiography - Pelvis - Child – Lithiasis



Author Biography: Pediatric Surgeon, Université Cocody Abidjan Cote d'Ivoire: March 2008. Brazzaville University Hospital Center Republic of Congo: April 2011. Hospital practice: neonatal surgery, visceral surgery, urology, orthopedics and hand traumatology. Université Marien Ngouabi Faculty of Health Sciences. Brazzaville, Republic of Congo: Temporary teacher from 2013-2016 and permanent teacher since October 2016