A rescue management plan for ruptured balloons during balloon vaginoplasty.

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Abstract:

Abstract OBJECTIVES: To present the first repeat procedure and a simple way for management of balloon rupture during balloon vaginoplasty (BV) procedures. STUDY DESIGN: Repeat BV (reBV) procedure was done for one case, and a ruptured catheter's end to new catheter's end (ENE) procedure was done for two cases. The anatomic and functional outcomes of reBV and ENE are presented. RESULTS: Balloon rupture and deflation were encountered in a total of 3/45 cases who had undergone BV procedures. Replacement time was 22 min for reBV, and 9 and 10 min for ENE. General anesthesia was needed in the reBV case. Post-operative course and final outcomes were generally good but objectively less favorable in the ENE than in the reBV case (neovaginal depths were 8.5 and 9.4 cm versus 11 cm, respectively). Penetration and satisfaction scores were increased up 85 points for both couples. CONCLUSIONS: Balloon ruptures were reported in 3/45 cases undergoing balloon vaginoplasty. End to new catheter end replacement was a very fast and simple rescue procedure but its preliminary anatomical outcomes were less favorable than the outcomes obtained with the original or repeat procedure. Copyright © 2012 Elsevier Ireland Ltd. All rights reserved.

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