

# Urologist



**Dr Jo Schoeman**  
Specialist Urologist

## PATIENT INFORMATION BROCHURE

### *ENDOSCOPIC VESICO-URETERIC REFLUX SURGERY (STING)*

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Patient well-being is my first priority!

## Endoscopic vesico-ureteric reflux surgery (STING)



### Indicated

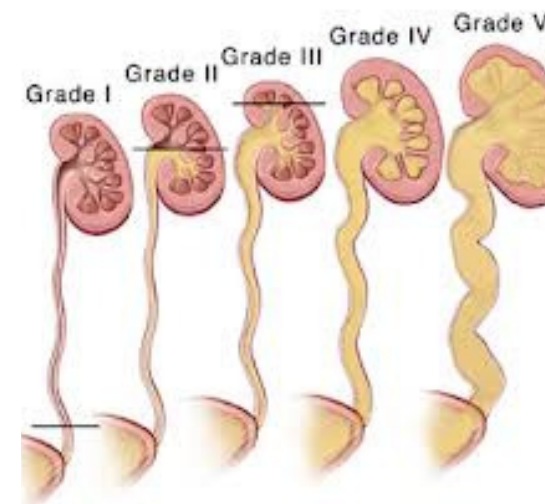
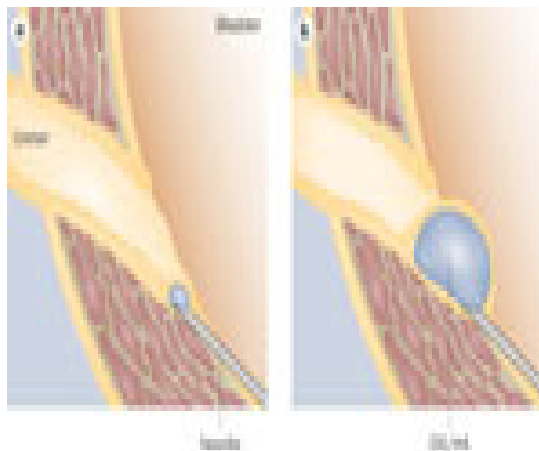
- For moderate **vesico-ureteric reflux**.
- It is a minimally invasive procedure performed with endoscopy.
- A synthetic material (Macroplastique) is injected at the ureteric opening to prevent reflux.

### Why is it done?

Grade 3-4 Vesico-Ureteric Reflux where conservative management has failed with a progressive deterioration in renal function.

### How is it done?

- Patients will receive a general anaesthesia.
- Prophylactic antibiotics are given.
- The correct ureteric system is identified and marked while you are awake.
- This will be an endoscopic procedure.
- A Cystoscopy will be done with injection of Macroplastique just under the affected ureteric orifice.
- Enough Macroplastique will be injected to partially close the ureteric opening, yet not obstructing the orifice.
- An indwelling catheter is placed.



### What next?

- You may be in hospital the day or overnight.
- As soon as you are comfortable with no signs of pain and emptying your bladder sufficiently, you will be discharged.
- A ward prescription may be issued on your discharge, for your own collection at any pharmacy.
- A follow-up appointment will be scheduled for 6 weeks to review with a CT IVP and cystogram to check on the end result of the ureter.
- Don't hesitate to ask Jo if you have any queries.
- **DON'T SUFFER IN SILENCE, OR YOU WILL SUFFER ALONE!**