

THE ROLE OF URINARY TRACT ULTRASOUND SCAN IN CHILDREN AFTER A SINGLE EPISODE OF ACUTE EPIDIDYMITIS

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Aim: Acute epididymitis is uncommon in the paediatric population. However, children diagnosed with acute epididymitis often undergo a follow-up urinary tract ultrasound scan (USS) to detect urinary tract abnormalities. The role of USS in identifying urinary tract abnormalities is still unclear. Our aim was to look for clinical efficacy of this follow-up imaging.

Methods: Retrospective chart review of children aged 0-16 years with diagnosis of acute epididymitis/epididymo-orchitis in the last three years (2012-2015) was done. Records were retrieved from Trust database (EPIC, LARDER and EMR) after approval. Children with known urinary tract abnormalities before the episode of acute epididymitis were excluded.

Results: Seventy children were identified. Seven patients with known urinary tract abnormalities were excluded. There was a bimodal distribution of age at diagnosis, 13 patients presented at less than one year of age and nine patients presented at 10 years old. Most of the older patients present with a tender, indurated, erythematous scrotum, while patients less than one-year-old presented with swelling and erythema. 19 patients were diagnosed using ultrasound, 43 diagnosed at operation, whilst five had both ultrasound and operation. 50 patients (79%) had follow-up ultrasound, three are still pending.

There were no significant urinary tract abnormalities detected. Three cases showed epididymal cysts, one of which had normal follow-up study. One case showed absent right ureteric jet. Another case showed mild right upper pole pelvi-calyceal dilatation. However, these findings were not significant enough requiring any further follow up. Therefore none of the USS added to clinical management.

Conclusion: Follow-up urinary tract USS does not show any significant renal tract abnormality in children presenting with a single episode of acute epididymitis. We suggest follow up urinary tract USS after a single episode of acute epididymitis is of limited use.