Cystoscopy and Ureteroscopy

When you have a urinary problem, your doctor may use a cystoscopy to see the inside of your bladder and urethra. The urethra is the tube that carries urine from the bladder to the outside of the body. The cystoscope has lenses like a telescope or microscope. These lenses let the doctor focus on the inner surfaces of the urinary tract. Some cystoscopes use optical fibers that carry an image from the tip of the instrument to a viewing piece at the other end. The cystoscope is as thin as a pencil and has a light at the tip. Many cystoscopes have extra tubes to guide other instruments for procedures to treat urinary problems. Your doctor may recommend cystoscopy for any of the following conditions: frequent urinary tract infections, blood in your urine (hematuria), loss of bladder control (incontinence) or overactive bladder, unusual cells found in urine sample, need for a bladder catheter, painful urination, chronic pelvic pain, or interstitial cystitis, urinary blockage such as prostate enlargement, stricture, or narrowing of the urinary tract, stone in the urinary tract, unusual growth, polyp, tumor, or cancer.

If you have a stone lodged higher in your urinary tract, the doctor may extend the cystoscope through the bladder and up into the ureter. The ureter is the tube that carries urine from the kidney to the bladder. When used to view the ureters, the cystoscope is called a ureteroscope. The doctor can then see the stone and remove it with a small basket at the end of a wire inserted through an extra tube in the ureteroscope. The doctor may also use the extra tube in the cystoscope to extend a flexible fiber that carries a laser beam to break the stone into smaller pieces that can then pass out of the body in your urine.

Cystoscopies are most often done in the office. You will be given an antibiotic prior to or immediately after the test. You will be able to eat normally and return to normal activities after the test. If you are going to have a ureteroscopy, this is done in the hospital or surgery center as an out-patient. You will most often receive a general anesthesia and will need a ride home after a ureteroscopy.

After the test: You may have a mild burning feeling when you urinate, and you may see small amounts of blood in your urine. These problems should not last more than 24 hours. Tell your doctor if bleeding or pain is severe or if problems last more than a couple of days. To relieve discomfort, drink two 8 ounce glasses of water each hour for 2 hours, avoid coffee, carbonated beverages and acidic juices. Ask your doctor if you can take a warm bath to relieve the burning feeling. If not, you may be able to hold a warm, damp washcloth over the urethral opening. If you have signs of infection, including pain, chills, or fever, call your doctor.