## CAPITOLUL VI VARIA

### RENAL CYSTS MANAGED LAPAROSCOPICALLY

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#### Video

**Introduction:** The transperitoneal laparoscopically management of renal cysts is presented.

Materials and Methods: The retrospective study concerns 13 cases operated laparoscopically, during last year in our center. Special attention was paid for large cysts. In one patient the cyst was infected (E. Coli). Overall time for cysts resection was between 30 and 95 minutes, with a median of 63 minutes.

**Results:** No mortality was recorded. No open surgery was necessary. Two postoperative complications are noted; a tiny uretheric urinary fistula dried after uretheric stenting and a necrotic perforation of ascending colon managed by right haemicolectomy. The patients were seen at 3 and 6 months postoperative.

**Conclusions:** However, laparoscopic excision of renal cysts is generally accepted as a minimally invasive technique with similar results as open surgery.

# CAZ REUȘIT DE TRATAMENT CHIRURGICAL ÎNTR-O SINGURĂ INTERVENȚIE LA CRIPTORHIDIE ABDOMINALĂ BILATERALĂ

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#### Summary

A successful case of surgical ireatment rBilateral Orchiopexie with Petrivalchi-Shumaher method fixation" by way of a single intervention of an 18-year-old patient with the diagnosis Bilateral Abdominal Cryptorchism". 85 patients were operated on according to this method.

Criptorhidia este o anomalie de dezvoltare destul de răspîndită, se depistează la 2,2% din elevii examinați, iar la maturi în 0,3% cazuri (1). La momentul nașterii, reținerea de dezvoltare a testiculelor se observă în 20-30% cazuri, la vârsta de un an - în 2% cazuri; la 13-14 ani -1%, iar la maturi mai mari de 21 ani anomalia se întâlneste în 0,3 la sută cazuri (2).

Manorhidia este mai fregventă (3) și reprezintă 75 la sută din numărul total al tulburărilor de migrație a testiculelor.

Majoritatea endocrinologilor recomandă de preferință terapie hormonală (4), cu toate că