

Spinning top urethra

A 6-year-old girl was referred to the authors' paediatric radiology clinic with recurrent urinary system infections. She had no medical history of note. Routine laboratory investigations were within normal limits. Ultrasonography of the urinary system was unremarkable. Voiding cystourethrography revealed a dilatation of the posterior urethra just distal to the internal sphincter (Figure 1) that persisted during voiding. No vesicoureteral reflux was detected. Thus, spinning top urethra was radiologically diagnosed. The patient underwent treatment including management of behavioural disorder with voiding retraining and biofeedback training.

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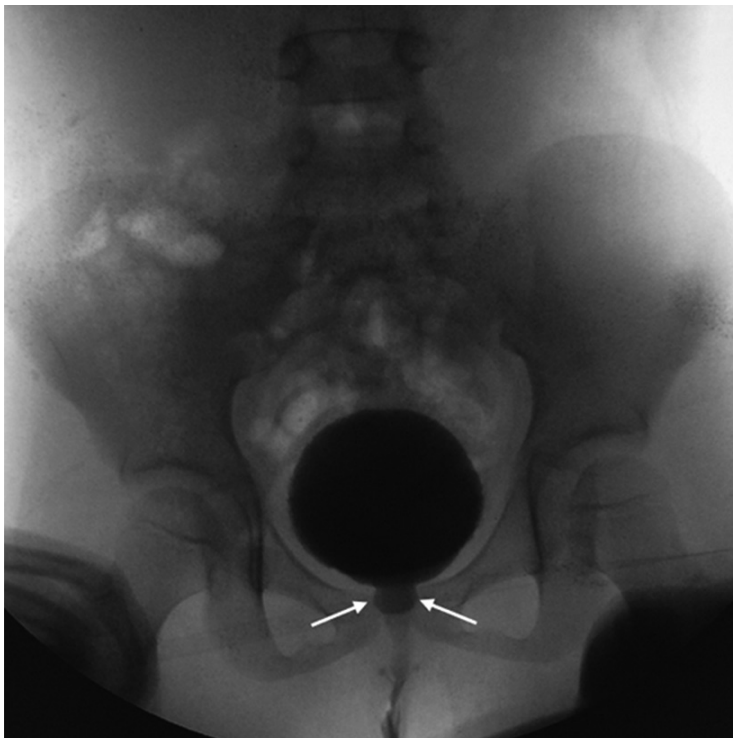


Figure 1. Anteroposterior negative voiding cystourethrography showing dilatation of the posterior urethra just distal to the internal sphincter, indicating spinning top urethra (white arrows).

The term spinning top urethra is used for cases of marked dilatation of the muscular segment of the urethra during voiding. Spinning top urethra usually occurs as a result of dyscoordination between the detrusor and external urinary sphincter, and is mainly detected in girls. In over 50% of patients, voiding cystourethrography is diagnostic of detrusor instability with spinning top urethra (Saxton et al, 1992; Kibar et al, 2007).

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