

# Bilateral ureterohydronephrosis associated with cystocele

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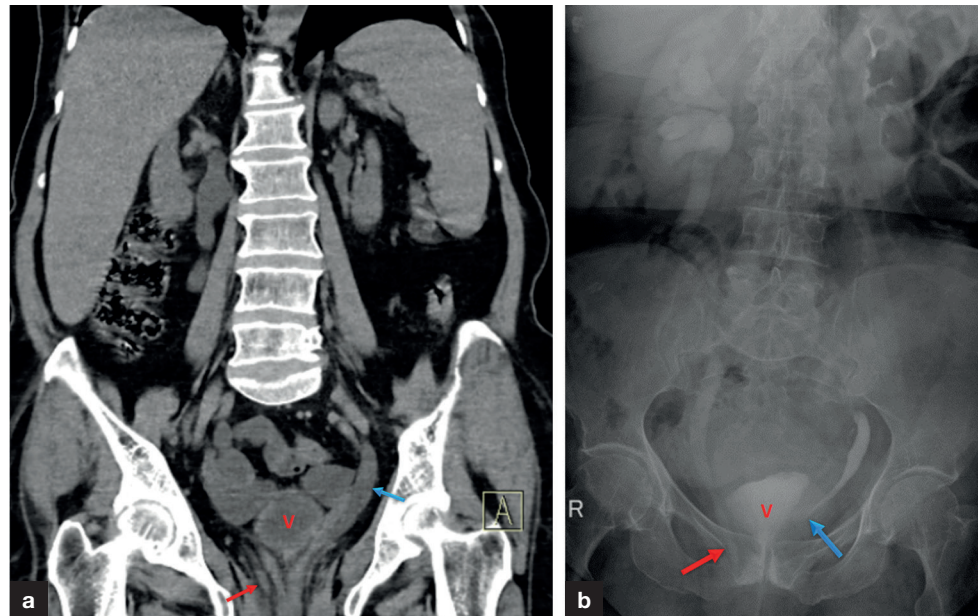
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A 70-year-old woman presented with recurrent urinary infection. A computed tomography scan demonstrated bilateral ureterohydronephrosis and cystocele (**Figure 1a**). A rectocele was also observed on computed tomography scan. The excretory urography confirmed the presence of bilateral ureterohydronephrosis and compression of the distal ureters (**Figure 1b**). The patient was referred to the urology department for surgical treatment.



**Figure 1.** a. Coronal computed tomography scan demonstrating bilateral ureterohydronephrosis and cystocele, and also revealing the presence of rectocele. b. Excretory urography confirmed the presence of bilateral ureterohydronephrosis and compression of the distal ureters. V= vesica, red arrow= right ureter, blue arrow= left ureter.

Approximately 3.1% of all patients who have pelvic organ prolapse can present with ureterohydronephrosis (Costantini et al, 2009). Recurrent urinary tract infection, haematuria, urgency and pelvic pain are the most common symptoms (Ozgul et al, 2019). Although uncommon, especially in the postmenopausal period, a cystocele must be kept in mind in the differential diagnosis of ureterohydronephrosis.

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