

examination. In case of diagnosis of contusion or partial rupture, a gentle effort to pass a urethral catheter was done. In all patients with total rupture and in these with partial rupture that the urethral catheterization attempt was unsuccessful, a suprapubic catheterization was performed followed by simultaneous cystography and retrograde urethrography. Delayed urethroplasty was performed in patients with total rupture. The mechanism of injury was correlated with total or partial rupture of the urethra.

Results: In 28 patients with injury of the posterior urethra with coexistent pelvic ring fractures, total rupture occurred in sixteen (16) while partial rupture in twelve (12). In 55 patients with injury of the anterior urethra we diagnosed:

Mechanism of injury	Total rupture of urethra	Partial rupture of urethra
Iatrogenic injuries	2	32
Blunt trauma	4	6
Penetrating injuries	4	3
Penile fractures	0	4

Conclusions: From our experience, mechanism of injury cannot prejudice partial or total urethral rupture, except in the case of iatrogenic injuries. Each patient should be assessed and managed according to the basic diagnostic algorithm.

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In-vivo haemostatic effect of Ankaferd Bloodstopper in rat major renal trauma model: controlled trial of novel haemostatic agent

C. Germiyanoglu¹, E. Huri^{2*}, T. Akgül¹, A. Ayyıldız¹, H. Üstün³.
¹Ankara Training and Research Hospital, Dept. of Second Urology Clinic, Ankara, Turkey; ²Ankara Training and Research Hospital, Dept. of Second Urology Clinic, Asagiyevecler, Ankara, Turkey; ³Ankara Training and Research Hospital, Dept. of Pathology, Ankara, Turkey

Introduction and Objectives: Major renal trauma is one of the most mortal condition which could cause death. Bleeding is the main reason of mortality. We used Ankaferd Bloodstopper (ABS) which is a medicinal product has been approved in the control of hemorrhage externally and dental surgery bleedings in Turkey to control the bleeding in renal trauma model and evaluated the efficacy of ABS.

Material and Methods: Twelve Wistar rats were divided into two groups. Group I (GI), control, Group II (GII), study group. Under general anesthesia, following the exposure of right kidney, 1 cm. deep incision was performed at the lower pole of kidney and 1 cm² tissue was resected. ABS solution was applied to resected area and compressed at least two minutes. Afterthat, bleeding control was evaluated. Time of bleeding control, number of ABS gout, live condition of rats following surgery were evaluated, at first month, sacrifice was performed, macroscopic and microscopic features were determined.

Results: Mean time of bleeding control was 3.2±0.8 (2-4) min in GII, no difference with GI (p<0.05). In each kidney, active haemostasis was provided with observing the aggregation unit of ABS onto the renal resected surface. In GII, active hemostasis was provided. Mean number of ABS gout was 6.0±1.1 (5-8). Glomerular necrosis was detected with higher rate in GI compared with GII. Erythrocyte aggregation was confirmed in GII. Calcification was formed significantly in GI compared GII (p<0.05). ABS kidneys were all in a good shape especially nearly to resected area, however, gelatinous, redness and wealthy tissue were observed in a macroviews at transected kidney. There were no hematomas, urinomas and urine leakage. In microscopic evaluation (H.E.), giant cell reaction, acute inflammation, fibrosis, adhesion, tiroidization,

fibroblast activation, calcification, fibrosis, glomerular necrosis, adhesion to adjacent organ were not detected while erythrocyte aggregation, cydherophage and microvascular proliferation were shown in each kidney.

Conclusions: ABS is an effective agent to stop active major bleeding in renal trauma model. The effect of ABS to renal histopathology shows positive clues without inflammation, fibrosis and tissue damage, and erythrocyte aggregation, bleeding control mechanism of ABS, are also shown in kidney histopathologically.

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Testicular injuries, consequences and medicolegal significance

D. Crnomarkovic*, S. Micic. *Clinical Center of Serbia, Clinic of Urology, Belgrade, Serbia*

Introduction and Objectives: To analyze testicular injuries, causes and consequences, especially threes influence on fertility and to asses threes medico legal significance.

Material and Methods: 57 patients, hospitalized and surgically treated, from January 1999 to December 2008, on urological department of KCS Belgrade. During hospitalization patients were physically examined, lab. Work and scrotal ultrasound were performed. On evident rupture or suspected rupture, we performed surgical exploration. Dependent on the findings, we performed orchyectomy or conservation of the testis. Procedure independently, every patient interested in his fertility was check out on 1, 3, 6 and 12 months, examined physically, scrotal ultrasound and spermogram. Results were statistically analyzed and schematically displayed.

Results: Patients age was between 14 and 74 years (X=35; DS=14.45) closed injury we found in 40 (70%) patients and opened injury we found in 17 (30%) patients. Causes of closed injuries were sport activities, fights, occupational injuries 50%, 42.5% and 7.5% respectively Causes of opened injuries were shot guns 6 (35%)self injuries, castration were found in 3 (17.5%) in psychological patients. In the rest of 8 (47.5%)opened injuries we found different accidents, motorbike accidents, dog bites, occupational injuries, fall on spiky object, jumping over the fence etc. 28 patients under the age of 40, childless or interested in having more children were interested in regular checkups during the following year on 1, 3, 6 and 12 months. 15 of which (no matter what kind of injury they suffered) had a good spermogram results. 13 patients, initially having a spermogram results below the usual finding, the number of spermatozoids, their shape and motility, during next 6 check ups, 3 and 6 months, have improved there sprmogram results so that on 12-th months examination, they had normal findings. The rest of 7 patients, unfortunately, suffered a bad spermogram finding, even when we performed other tests, hormonal analysis (FSH, LH, PL, and T0 so to exclude other possible causes of these findings

Conclusions: testicular injuries, leading to loss of testis or surgically repaired, conserving tests, may lead to male infertility. This condition may be transient but may have a long term consequences. Since great number of these injuries were fight afflicted, guns afflicted, sport injuries and occupational hazardous, these consequences have a medico legal significance. Problem arising in this case is to display that the patient left with permanently afflicted fertility had a good fertility prior to injury.