Urinary diversion after pelvic exenteration for gynecologic malignancies

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**Techniques**

- A. Bricker ileal conduit
- B. Double-barreled wet colostomy
- C. Continent self-catheterizable Miami Pouch
- D. Y-shaped ileal orthotopic neobladder

**Considerations**

**Selection of technique**
- Patient risks
- Disease type
- Healthcare institution

**Postoperative care**
- Learning of diversion management

**Complications**
- Urinary infection
- Lithiasis
- Ureteral leakage

**Quality of life**
- No major differences

**Conclusions**

- No ideal technique
- Discussion of pros and cons
- Urinary reconstruction individualized for each patient
- Strong patient engagement with continent diversions
- Need of centralization of pelvic exenteration

Patient’s choice