Effect of split-appendix technique on outcomes of Mitrofanoff channels

Michael Daugherty, Andrew Strine, Brian VanderBrink, Jason Frischer, William DeFoor, Curtis Sheldon, and Pramod Reddy

Cincinnati Children’s Hospital Medical Center, Cincinnati, USA
2010-2016

Mitrofanoff
n=106

Split Appendix
n=64

No Split Appendix
n=42

Appendicovesicostomy
n=15

Monti-Mitrofanoff Ileovesicostomy
n=27
Outcomes

- No differences in complication rates
- No difference in rates of any revision overall
- Monti channels had higher rates of subfascial revisions
Conclusions

• Effective option for patients requiring urinary reconstruction for simultaneous management of bladder and bowel

• Does not affect 30-day complications or long term revision rates of channel

• May allow for optimal outcome while minimizing morbidity of bowel anastomosis