Mitrofanoff procedure

A Mitrofanoff (me-TROFF-an-off) Channel is a small tube connecting the bladder to the outside of the body, usually in the folds of the belly button. It is created in surgery using the appendix, if it is healthy. If the appendix cannot be used, a part of the intestine is used. (Picture 1) Mitrofanoff is the last name of the doctor who developed the procedure.

before the operation

Your child will be admitted to the hospital 2 days before the surgery for a bowel clean-out. During these two days, he or she will be on a clear liquid diet.

Food and drink – While in the hospital before surgery, your child may not have any solid food.

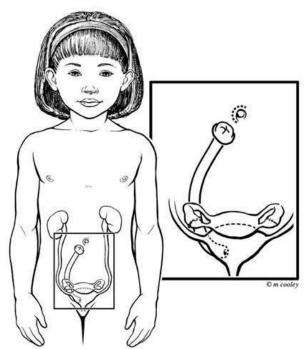
You will be instructed if water, Pedialyte[®], 7-Up[®] or clear apple juice may be given the day before surgery.

bowel cleanout

Your child's bowels must be cleaned out before we can do the surgery. This is done by giving the child a flavored liquid medicine. Your child will also receive antibiotics by mouth to help with the bowel clean-out. A nasogastric (NG) tube may need to be placed if your child is unable to drink the large amount of medicine. The NG tube goes in the nose and carries liquid medicine to the stomach.

the day of the surgery

Your child will be taken to the surgery area to prepare. Families may stay with their child until he or she is taken to the operating room.



Picture 1 The Mitrofanoff Procedure connects the bladder to the outside of the body.

Your child will be given a general anesthetic before the surgery is started. This means your child will be asleep during the surgery and will not feel any pain during the operation.

The length of time the surgery will take varies. Your surgeon will talk with you about this before the surgery.

When the surgery is over, your child will be cared for in the Post Anesthesia Care Unit (PACU). You will go back to your child's room once he or she has awakened from the anesthesia.

(continued on reverse)



the day of the surgery (continued)

What to expect when your child returns from surgery:

- Your child will have an IV (intravenous line) to receive liquids
- There will be an incision covered by a bandage on your child's abdomen (belly).
- Two tubes (catheters) will be in place. One tube will be from the Mitrofanoff channel. The other one, called a suprapubic catheter, will come from your child's lower abdomen.
- An NG tube may be in one of your child's nostrils. The NG tube is attached to a drainage tube.
- There may be a drain from the abdomen that looks like a thick plastic band. It will be taken out before your child goes home.

bladder spasms

Sometimes tubes can irritate the bladder and can cause cramping. These cramps are called bladder spasms. There are medicines we can give your child to relax the bladder.

pain control after surgery

There are many ways to control pain after the surgery. These include:

- IV pain medicine given at certain times
- Patient controlled analgesia (PCA). This is a machine that lets patients give themselves a small dose of pain medicine when needed. This is not often used for young children.
- Pain medicine taken by mouth when the child is able to take oral liquids.

Your doctor will decide what method is best for your child's needs.

If you have any questions, be sure to ask your child's doctor or nurse.

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