

## **Colgajo de Singapur como alternativa quirúrgica para reconstrucción de fístulas vesicovaginales**

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2022117043224

Trabajo de Investigación presentado como requisito para optar el título de:

**Especialista en Cirugía Plástica Reconstructiva y Estética**

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## RESUMEN

**Introducción:** La fístula vesicovaginal (FVV) es una comunicación anómala entre la vejiga y la vagina que ocasiona pérdida continua e involuntaria de orina a través del canal vaginal. Constituye la forma forma más frecuente de fístula genitourinaria adquirida y se asocia con impactos negativos en la calidad de vida de las pacientes. En fistulas complejas, los tratamientos conservadores tienen bajas tasas de éxito y alta recurrencia, Por esto son necesarias alternativas quirúrgicas efectivas y reproducibles especialmente en países en vías de desarrollo, donde el acceso a recursos especializados es limitado.

**Objetivo:** Describir la experiencia institucional y evaluar los resultados de la corrección de fístula vesicovaginal mediante colgajo de Singapur, como alternativa reconstructiva efectiva en un contexto de recursos limitados.

**Metodología:** Se realizó un estudio observacional, descriptivo y retrospectivo tipo alternativa quirúrgica, que incluyó diez mujeres con diagnóstico de fístula vesicovaginal compleja manejadas en un servicio de Cirugía Plástica. En todas las pacientes se efectuó la corrección de la fístula y la restauración de la pared vaginal mediante un colgajo de Singapur. Se registraron variables clínicas, datos quirúrgicos, complicaciones postoperatorias y evolución funcional durante un seguimiento mínimo de doce meses.

**Resultados:** Se obtuvo cierre completo de la fístula en el 90 % de las pacientes, con resolución de la incontinencia urinaria y mejoría en la calidad de vida. La recurrencia se presentó en el 10 % de los casos. El colgajo de Singapur demostró ser una opción segura, reproducible, con baja morbilidad y resultados satisfactorios.

**Conclusión:** El colgajo de Singapur es una alternativa quirúrgica eficaz, y reproducible para la corrección de fístulas vesicovaginales complejas en contextos de recursos limitados, con altas tasas de cierre definitivo, baja morbilidad y un impacto favorable en la calidad de vida de las pacientes. Se requieren estudios con muestras más amplias y seguimientos prolongados que permitan consolidar la evidencia sobre su utilización en países en vías de desarrollo.

**Palabras clave:** Fístula vesicovaginal; colgajo de Singapur; colgajos fasciocutáneos; cirugía reconstructiva; países en vías de desarrollo.

## ABSTRACT

**Introduction:** Vesicovaginal fistula (VVF) is an abnormal communication between the urinary bladder and the vagina that results in continuous and involuntary leakage of urine through the vaginal canal. It represents the most common form of acquired genitourinary fistula and is associated with a significant negative impact on patients' quality of life. In complex fistulas, conservative treatments have demonstrated low success rates and a high recurrence rate. Therefore, effective and reproducible surgical alternatives are required, particularly in developing countries, where access to specialized resources is limited.

**Objective:** To describe the institutional experience and to evaluate the outcomes of vesicovaginal fistula repair using the Singapore flap as a reconstructive alternative in a resource limited setting.

**Methods:** An observational, descriptive, and retrospective case series study was conducted, including ten women diagnosed with complex vesicovaginal fistula who were treated at a Plastic Surgery service. In all patients, fistula repair and vaginal wall reconstruction were performed using a Singapore flap. Clinical variables, surgical data, postoperative complications, and functional outcomes were recorded during a minimum follow-up period of twelve months.

**Results:** Complete fistula closure was achieved in 90% of patients, with resolution of urinary incontinence and self-reported improvement in quality of life and sexual function. VVF recurrence occurred in 10% of cases. Partial flap necrosis was documented in 10% of patients and was managed conservatively, achieving secondary-intention closure. No complications at the donor site or major adverse events related to the procedure were observed.

**Conclusion:** The Singapore flap appears to be an effective, and reproducible surgical alternative for the repair of complex vesicovaginal fistulas in resource-limited settings, providing high rates of definitive closure, low morbidity, and a favorable impact on patients' quality of life. Larger studies with longer follow-up are needed to strengthen the evidence supporting its use in developing countries.

**Keywords:** Vesicovaginal fistula; Singapore flap; reconstructive surgery; developing countries.

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