

Annual World Congress on **PSYCHIATRY**

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**Urethral foreign body insertion - an important presentation for both Urology and Psychiatric specialties****Clio Kennedy***University College Hospital at Westmoreland Street, UK*

Although retained urethral foreign bodies represent a rare occurrence in daily urological practice, it is an important presentation for surgeons to be aware of and familiar with. Further, it may be indicative of mental health issues or be causative to longer term psychological distress. The most common causes of foreign body insertion into the lower genitourinary tract include sexual curiosity, sexual practice after intoxication, and mental health issues. This may at times represent the first psychiatric illness presentation. A thorough assessment of mental state is, consequently, of paramount importance. Urologists should be aware that onward referral to mental health services might be required. In the acute setting, patients may present with physical symptoms of abdominal discomfort, dysuria, gross haematuria, painful erection, acute urinary retention or decreased urinary flow and swelling of the external genitalia. Foreign bodies within the urethra can also cause delayed complications. These can include recurrent urinary tract infections, urethral strictures or false passages and bladder perforation, which may require major reconstructive procedures to restore the anatomy and prevent permanent damage of the lower urinary tract. The physical harms inflicted both acutely and longer term can have a dramatic impact on emotional well-being. When patients are admitted under urology with such presentations it is important to ensure that a full assessment of their mental state is not neglected in favour of the urgent need for surgical assessment and management. Both are essential, and urological surgeons must prioritise working closely with liaison psychiatry colleagues and being guided by their expertise. Further, even if it is thought that the underlying cause is not psychiatric in nature, surgeons should be aware of the potential impact of complications on future mental health, and optimise the recovery of patients physical, mental, and emotional with a holistic approach.

**Biography**

Dr Clio Kennedy graduated in 2017 from Guy's, King's, and St Thomas' School of Medicine, King's College London. After choosing to initially to pursue a career in urology, she is now moving toward psychiatry as a specialty. Clio has been inspired by working closely with peri-operative surgical patients exhibiting mental health issues and psychological distress, at times associated with their urological pathology. She is aiming to go into liaison psychiatry with a special interest in surgical patients.