

Re: Laparoscopic Upper-Pole Nephroureterectomy in Infants

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To the Editor:

The authors reported the results of laparoscopic upper-pole nephroureterectomy, and demonstrated that this procedure is safe and feasible in the infant population without compromise of results. Seven procedures were performed in the transperitoneal fashion, with reasonable operative times, short convalescence and overall improvement in tubular function.

Acceptance of pediatric urologic laparoscopy, particularly in the infant population has lagged behind its adult counterpart, in large part due to the nature of

the practice of pediatric urology. However, compared to the adult population, the laparoscopic approach to partial nephrectomy in children is more straightforward due to clear anatomic and vascular planes between the upper and lower duplex systems, decreasing the risk for damage to the vascular supply to the remnant pole.

Based on their findings, transperitoneal laparoscopic upper-pole nephroureterectomy should be considered a viable treatment modality in an infant with a nonfunctioning upper or lower renal moiety.

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