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Medi Tour and Health Tourism Service

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Urology Surgery in India

Overview:
Urology addresses everything from reproductive problems in male patients to urinary issues in either sex; surgeons may operate on the bladder, kidneys, ureter, or genitals. At one extreme, full reconstruction of urinary or reproductive systems is an option. At the other, urology boasts a number of less invasive, technologically sophisticated methods to deal with delicate structures. Among six one suffers from urinary system problems. Urosurgery in India will be the best solution to them for this problem.

What is Urology surgery?
Urology surgery is a field of surgical specialty involved in the surgical evaluation and treatment of diseases involving the organs of the excretory system [kidneys, ureters, bladders, prostate, testicles, penile organs, etc.]. The surgical procedure mainly comprises of urogenital procedures like inguinal hernia surgery, total cystectomy, bladder tumor surgery, and many other urosurgery procedures.

Why visit Urologist?
Symptoms that may lead you to visit a urologist often involve problems with your urination. You may experience difficult urination. You may have a burning pain during urination. Sometimes, patients notice blood in their urine or on the toilet paper. Other patients may seek help for frequent urination during the night. Men who seek an urologist’s help may suspect that they have erectile dysfunction. They may experience impotence. Other patients may have problems with urinary incontinence, which is involuntary leakage of urine. Your doctor may want to run some tests during your first visit, in addition to a routine physical exam. He may run tests on your urine and blood. You may also undergo a pelvic exam and possibly x-rays. Sometimes, tests are scheduled for a later date, rather than on your first visit. For example, if you undergo a cytoscopy, which is an examination of the bladder, this will not likely happen on the first visit. When a diagnosis is reached, carefully consider all possible treatment options with your urologist.

Medical conditions:
1. Recurrent urinary tract infections
2. Urinary incontinence; overactive bladder
3. Interstitial cystitis
4. Prostatitis
5. Enlarged prostate
6. Kidney stones
7. Male and female infertility
8. Sexual dysfunction (male or female)
9. Cancers throughout the urinary tract (kidney, bladder, prostate, and testicular cancers)
10. Erectile Dysfunction
11. Genitourinary Tract Injuries
12. Peyronie's Disease
13. Priapism
14. Urethral Injuries
Types of Urology Surgery:

- The various types of procedure under Urosurgery are as under:
  - Cystoscopy
  - Ureteroscopy
  - Endopyelotomy
  - Inguinal Hernia
  - Internal Urethrotomy
  - Laparoscopic Pyeloplasty
  - Lithotripsy
  - Nephrostomy
  - Orchiectomy
  - Percutaneous Nephrolithotomy
  - Radical Nephrectomy
  - Radical Prostatectomy
  - Total Cystectomy
  - Trans Vaginal Tape
  - TUR-Bladder Tumour
  - Transurethral Resection of Prostate
  - Urethroplasty
  - Vesicovaginal Fistula
  - Orchiopexy

Common Urology surgery procedures:

**Cystoscopy:** A cystoscopy is an examination of the inside of the bladder and urethra, the tube that carries urine from the bladder to the outside of the body. In men, the urethra is the tube that runs through the penis. The doctor performing the examination uses a cystoscope—a long, thin instrument with an eyepiece on the external end and a tiny lens and a light on the end that is inserted into the bladder. The doctor inserts the cystoscope into the patient’s urethra, and the small lens magnifies the inner lining of the urethra and bladder, allowing the doctor to see inside the hollow bladder. Many cystoscopes have extra channels within the sheath to insert other small instruments that can be used to treat or diagnose urinary problems. Patients may have a mild burning feeling when they urinate, and they may see small amounts of blood in their urine. These problems should not last more than 24 hours. Patients should tell their doctor if bleeding or pain is severe or if problems last more than a day.

**Ureteroscopy:** is an examination or procedure using an ureteroscope. An ureteroscope, like a cystoscope, is an instrument for examining the inside of the urinary tract. An ureteroscope is longer and thinner than a cystoscope and is used to see beyond the bladder into the ureters, the tubes that carry urine from the kidneys to the bladder. Some ureteroscopes are flexible like a thin, long straw. Others are more rigid and firm. Through the ureteroscope, the doctor can see a stone in the ureter and then remove it with a small basket at the end of a wire inserted through an extra channel in the ureteroscope. Another way to treat a stone through a ureteroscope is to extend a flexible fiber through the scope up to the stone and then, with a laser beam shone through the fiber, break the stone into smaller pieces that can then pass out of the body in the urine. How and what the doctor will do is determined by the location, size, and composition of the stone. The examination may be performed with either a flexible or a rigid fiberoptic device while the patient is under a general anesthetic. The patient is usually free to go home after the examination.

**Endopyelotomy:** is an endoscopic procedure to treat ureteropelvic junction (UPJ) obstruction. The kidney is either approached through the Percutaneous Nephrostomy tube (from the side i.e. Antegrade Endopyelotomy) or through the urethra and urinary bladder (Retrograde Endopyelotomy). Endopyelotomy relieves the obstruction in the upper part of the ureter called the renal pelvis. Obstruction of the ureteropelvic junction (UPJ) can be caused by congenital abnormalities like horseshoe kidney, fibrous scarring due to stone or previous operation, a blood vessel which may kink the UPJ or a stone that gets impacted in the upper part of ureter. This can cause damage to kidney tissue and eventually lead to pain, stone formation, infection, high blood pressure, deterioration of kidney function and eventually kidney failure. Endopyelotomy is a popular
procedure to relieve all these symptoms. If you have obstruction of the ureteropelvic junction (UPJ) which can be caused by birth defects of the kidney like horseshoe kidney, fibrous scarring due to stone or previous operation, or if you have a blood vessel which may cause your ureteropelvic junction (UPJ) to kink or if you have a stone that gets impacted in the upper part of ureter, then you are an ideal candidate for Endopyelotomy.

Nephrostomy: A nephrostomy is performed whenever a blockage keeps urine from passing from the kidneys, through the ureter and into the urinary bladder. Without another way for urine to drain, pressure would rise within the urinary system and the kidneys would be damaged. The most common cause of blockage necessitating a nephrostomy is cancer, especially ovarian cancer and colon cancer. Nephrostomies may also be required to treat pyonephrosis and kidney stones. Nephrostomies are created by surgeons or interventional radiologists and typically consist of a catheter which pierces the skin and rests in the urinary tract. It is performed under ultrasound guidance, CT fluoroscopy or under image intensifier. Local anesthetic infiltration is used to numb the area where the needle would pass through to make the puncture on the kidney. Newer technologies such as 3D fluoroscopy are being developed to aid in placement of these types of drainage tubes. Urine is collected in an external bag which can be emptied as often as necessary. Care of the nephrostomy tube is important. It is located on the patient's back, so it may be necessary to have someone help with its care. The nephrostomy tube should be kept dry and protected from water when taking showers. The skin around it should be kept clean, and the dressing over the area changed frequently.

Total Cystectomy: Cystectomy is surgical removal of all or part of the urinary bladder. Total Cystectomy, also known as Radical Cystectomy is surgical is the removal of the entire bladder, nearby lymph nodes (lymphadenectomy), part of the urethra, and nearby organs that may have been invaded by the cancer cells. In men, the nearby organs that are removed are the prostate, the seminal vesicles, and part of the vas deferens. In women, the cervix, the uterus, the ovaries, the fallopian tubes, and part of the vagina are also removed. The ureters are disconnected from the bladder and urinary diversion is created. Cystectomy is a major surgical operation. The patient is placed under general anesthesia. An incision is made across the lower abdomen. The ureters are located, tied and cut. After the operation, the patient is given fluid based nutrition until the intestines being to function normally again. Antibiotics are given to prevent infection of the incision sites. The nature of the organs removed means that there will be major lifestyle changes for the person undergoing the operation. Men will become impotent because nerves controlling penile erection are cut during removal of the bladder. As with any major surgery, there is a risk of infection; in this case infection of the intestine is especially dangerous as it can lead to peritonitis.

Urethroplasty: An Urethroplasty is an operation for the repair of an injury or a defect in the walls of the urethra. Commonly, this involves removal and end-to-end anastomosis for shorter strictures or grafting using buckle mucosa for longer ones. It can be performed by 2 methods; primary repair which involves complete excision of the narrowed part of the urethra. The proximal and distal patent parts are then rejoined. The second method of Urethroplasty utilizes tissue transfer or free graft technique. In this method, tissue is grafted from bladder epithelium or buccal mucosa and is used to enlarge the strictured (narrowed) segment of the urethra. If you have a urethral stricture due to any of the causes i.e. repeated episodes of urethritis, benign prostatic hyperplasia, scarring from a previous surgery, injury or trauma most commonly to the pelvic region or from pressure of a tumour, then you are an ideal candidate for Urethroplasty. The success rate reported for Urethroplasty to treat urethral stricture is 70 - 80%. Urethroplasty has optimal results in case of small strictures (2 cm or less) as well as large strictures i.e. more than 2 cm.

Preparing for the surgery:

Being told that you need surgery is not likely to be music to your ears. But there are important questions that you can ask your urologist to reduce your anxiety and help you gain trust in working with your urologist. Go to your appointment with a list of what is on your mind. Here are some things that might help you get the most out of your appointment.

- Can you describe the surgery and what it will do for me?
- Should I have surgery right away or can we wait?
- Do I have anything to lose if we watch the condition and delay surgery?
- Is there anything that I can do to improve my condition?
- Can you tell me how quickly my problem might progress?
- What kind of outcomes can I expect if I undergo this surgery?
- How fast will my recovery be?
- How many of these procedures have you performed?
- How do you feel about me getting a second opinion?
- Are there any other treatments available for people with my condition?
Advance Procedures:

Robotic Urosurgery: or URobotics, is a new interdisciplinary field for the application of robots in urology and for the development of such systems and novel technologies in this clinical discipline. Urosurgery is among the medical fields with the highest rate of technology advances, which for several years has included the use medical robots. Robotic surgery is in a phase of worldwide rapid evolution. Data from many centers indicate that urologists are achieving equivalent, or better, operative outcomes using a robotic laparoscopic interface compared with their open results. Patients benefit from quicker convalescence, less pain, and shorter hospital stays. Other, URobotics systems are under development. These include image-guided robots that, in addition to the direct visual feedback, use medical images for guiding the intervention. Since MRI provides enhanced visualization of soft-tissues compared to x-ray-based imaging, MRI compatible robots are being developed to assist the physician in performing the intervention in the MRI scanner. If prostate cancer lesions can be delineated in the image, robots can accurately target those lesions for biopsy or focal ablations.

Why Urology surgery in India?

Medical tourism industry in India is making rapid progress and development serving abroad patients with effective health recovery service and medical treatment options at economical medical expenses. So if you are willing to take Urosurgery in India it will be the best decision you ever made. India is not a developing country from medical treatment point of view now; it is already developed under the medical guidance of experienced, talented and skilled Urosurgeons. The latest inventions in the medical field have made India a suitable destination for urosurgery. The modern methodologies and facilities at a reasonable price for under going any kind of surgery have helped the international patients for coming India for speedy health gains.

The Division of Urology at our state of the art affiliate hospitals is committed to delivering state-of-the-art care to all patients with problems involving the kidneys, ureters, and bladder, prostate and sexual organs. India offers latest in minimally invasive surgical technique including laser surgery, seed implantation for prostate cancer, shock-wave lithotripsy and percutaneous procedure for urinary stome disease. Female incontinence procedures are often performed as an outpatient procedure. Nerve sparing techniques are routinely used when radical prostatectomy is performed to treat prostate cancer.

Now day's the following major industrialized cities are providing urosurgery in India with the presence of vast pool of qualified Urosurgeons to assure you the best facilities during your medical treatment and the experience will be fabulous because you will be provided by adventurous holiday tour packages at an affordable charge.

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<thead>
<tr>
<th>City</th>
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<tr>
<td>Mumbai</td>
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<td>Chennai</td>
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<td>Chandigarh</td>
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Urology surgery cost in India:

The Urology surgery is charged heavily in western countries like UK, US, Canada and Europe as compared to India. India offers outstanding medical services at 60-80% less than prevailing USA rates. Even with travel expenses taken into account, the comprehensive medical tourism packages still provide a savings measured in the thousands of dollars for major procedures.

<table>
<thead>
<tr>
<th>Procedure</th>
<th>USA</th>
<th>India</th>
<th>Thailand</th>
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<tbody>
<tr>
<td>Meatoplasty</td>
<td>15,000</td>
<td>3,000</td>
<td>10,000</td>
</tr>
<tr>
<td>Vesicovaginal Fistula</td>
<td>3,450</td>
<td>5,690</td>
<td>15,000</td>
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<tr>
<td>Artificial Sphincters for Urinary Incontinence</td>
<td>42,500</td>
<td>10,000</td>
<td>14,200</td>
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<tr>
<td>Pubovaginal slings</td>
<td>9,000</td>
<td>1,800</td>
<td>2,500</td>
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Urology Surgery in India Patients Testimonial:

Mr. Jonathan, USA
Complex Urology Surgery

My own surgeon in my home country was unable to provide me best medical healthcare facilities for urosurgery. I was so impressed not only with the surgeons, staff but also the care, dedication and service I received for urology surgery at Hyderabad in India. "I believe it is essential to find a surgeon that you can give absolute trust to. All doctors always

Mrs. Onwozulu, Nigeria
Urosurgery for her husband

Hello, I am Mrs. Onwozulu from Nigeria. My husband got his surgery in India with the assistance of Tour2India4Health group. Some of my friends in Nigeria have been to India for medical treatment. All of them consulted to Tour2India4Health group. Thus inspired by them, I also decided to go ahead with Tour2India4Health group. I mailed my queries about my husband’s surgery and the list of good Indian Urosurgery hospitals

Mr. Ben Okoro, Nigeria
Prostate-n-Bladder Cancer Surgery

Hello everyone! I am Ben Okoro, from Nigeria. I want to share my experience for Urological Treatments in India under one of the best surgeons of the country. I searched over the internet and read the reviews of the patients who got Urological Treatments in India. I was getting courage by reading there testimonials. Finally I decided to come to India for Urological Treatments and I came to India by the tour2india4health website My Urological Treatments in India was done under proficient surgeons and in preeminent hospitals. I suggest all the people from around the world to come to India for surgery and treatment, as being one of the best in medical facility.
Knee Replacement Surgery in India

Knee replacement surgery, also known as knee arthroplasty, is a procedure to replace the weight-bearing surfaces of the knee joint to relieve pain and disability caused by osteoarthritis. It may also be performed for other knee diseases such as rheumatoid arthritis and psoriatic arthritis. The procedure has been proven to help individuals return to moderately challenging activities such as golf, bicycling, and swimming. Total knees are not designed for jogging or sports like tennis and skiing (although there certainly are people with total knee replacements that participate in such sports). Knee replacement is a routine surgery performed on over 60,000 people worldwide each year. Over 90% of people who have had total knee replacement experience an improvement in knee pain and function.

Knee Replacement Surgery Candidates

A person would be considered a candidate for knee replacement if there is:

- Daily pain
- The pain is severe enough to restrict work, recreation, and ordinary activities of daily living
- Significant stiffness in the knee
- Significant instability (constant giving way) of the knee
- Significant deformity (knock-knees or bow-legs) that hinders normal function of the knee
- Damage from arthritic conditions, such as osteoarthritis, rheumatoid arthritis, or post-traumatic arthritis

Success Rate of Knee Replacement Surgery:

Knee replacement surgery is recognized as a miracle of modern surgery. Most orthopedic experts consider replacement to be the best method of handling arthritis in the knee. Knee replacements have literally put hundreds of thousands of Americans back on their feet and allowed them to enjoy their golden years.

Knee Replacement Surgery Preparations:

- If you smoke, cut down or quit. Smoking changes blood flow patterns, delays healing, and slows recovery.
- If you drink, don't have any alcohol for at least 48 hours before surgery.
- Ask your doctor for pre-surgical exercises. If you are having hip or knee replacement surgery, doing exercises to strengthen your upper body will help you cope with crutches or a walker after surgery.
- Your primary care physician or an internist will conduct a general medical evaluation several weeks before surgery. This examination will assess your health and your risk for anesthesia. The results of this examination should be forwarded to your orthopaedic surgeon, along with a surgical clearance.
- Shortly before your scheduled surgery, you will probably have an orthopedic examination to review the procedure and answer any last-minute questions.
- You may need to take several types of tests, including blood tests, a cardiogram, a urine sample, and a chest X-ray.
- Advise your surgeon of any medical conditions you have and of all the medications you are taking. You may need to stop taking certain medications or your surgeon may recommend substitute medications until your surgery. Medications such as corticosteroids, insulin, or anti-coagulants will need to be managed before and after surgery.

CONTACT DETAILS

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