

# Surgery to your child's ureter tube to improve flow of pee from the kidney (pyeloplasty)

Children's Hospital

Last reviewed: December 2025

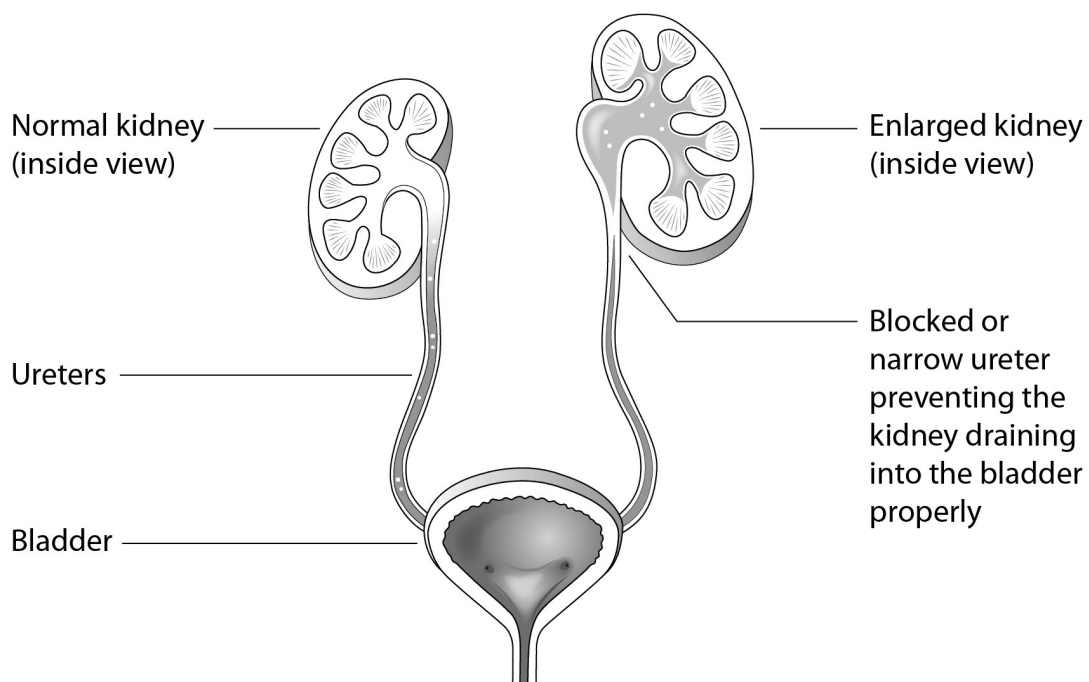
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Information for Patients, Parents & Carers

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## What is a pyeloplasty?

Pyeloplasty is a surgery used to unblock or widen a narrow part in the tube that drains pee (urine) from the kidney to the bladder (ureter). This is where the ureter joins the kidney (pelvic-ureteric junction).



Simple diagram showing urinary system

The child is born with the blockage or narrowing. It is not caused by anything the mother did whilst pregnant.

Health information and support is available at [www.nhs.uk](http://www.nhs.uk)  
or call 111 for non-emergency medical advice

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## Why does my child need this surgery?

The pee which is made by the kidneys cannot drain into the bladder properly. The kidney becomes swollen (hydronephrosis). This can damage the kidney. Your child needs this surgery to prevent damage to their kidney.

The narrowing/ blockage is usually on one side but sometimes can be on both sides.

In the surgery we will remove the narrowed piece of ureter and join the ends over a tiny tube JJ stent placed inside the ureter with small stitches. We do this under general anaesthetic. This means your child will be asleep and will not feel anything. The operation will take about 2 to 3 hours. Your child will be in hospital for 3 to 5 days.

## Complications:

- **Pee leaking (urinoma):** Pee may leak from the stitch line used in the repair. To stop this happening we use a JJ to avoid leaks. Some pee can leak and cause infection. Rarely this may need drainage or antibiotics. This may happen in 1 in 10,000 cases.
- **Collection of clotted blood (hematoma):** Blood may leak from a damaged blood vessel and collect under the skin. This may happen in 1 in 1000 cases. However, bleeding from the operative site often goes away by its self.
- **Scarring** at the operation site.
- **May need the operation again:** The narrowing (stricture) can happen again. This may happen in 1 in 10,000 cases.
- **Stent related problems:** The stent can move, get infected, and stones can form on it over time. This may happen in 1 in 1000 cases.
- **Blood in pee (hematuria):** Some blood in pee can be because of the stent rubbing inside. This tends to stop when we remove the stent 6 to 8 weeks after the operation. This may happen in 1 in 100 cases.

## After the operation

When your child comes back to the ward they will have regular checks to make sure they are recovering well from the anaesthetic.

Your child may not be able to drink straight away and so will have a small tube (cannula) inserted into the vein to give them fluid. Your nurse will let you know when your child can drink.

Your child may also have a tube to drain their pee into a bag (catheter). They may also have a tube coming from their tummy near the wound (drain). This helps everything heal by draining away any blood or pee that might ooze inside.

The tubes will be securely fixed and your child will soon get used to them. The nurse will show you how to look after the tubes when your child is up and about.

Your child will be given strong pain relief usually morphine after the surgery. You can ask the nurse to explain all about pain relief. Let the nurse know if your child is in pain. Sometimes children get cramps in their bladder caused by the catheter. The nurse will give medicine to stop this if it happens.

To prevent infection after the surgery the nurse will give your child antibiotics into the cannula for the first few days.

## **Discharge information**

The following advice will help you care for your child at home after the surgery:

- Your child may bath as normal.
- Your child may still have discomfort depending on how many days since the operation. If within 48 hours (2 days) of the operation give regular pain relief. If after this time give pain relief as and when your child needs it.
- If your child is at school they need to have 2 weeks off. They will then need to avoid sports and rough play for 2 weeks after starting school.
- Your child will need to take antibiotics every day for several months until the doctors are happy they can stop. This is to prevent urine infections after the surgery because of the stent being inside.
- If a stent was inserted during the pyeloplasty, your child will need another procedure called a cystoscopy. This will be under a general anaesthetic. It is to take out the stent. This will be 6 to 8 weeks after the pyeloplasty. We will send you a letter in the post with the details for this.

## **Look out for signs of a urine infection**

If your child has any of these symptoms contact the ward, urology nurse or your GP who will advise you:

- high temperature
- pain when peeing
- smelly or cloudy pee

## **What to expect with the wound:**

- It should heal by itself.
- It will have a certain amount of swelling.
- It will look bright pink.



## If your child has any of these symptoms please contact Ward 10 or the Emergency Department:

- If the wound starts to bleed.
- If the wound becomes red and/ or more painful when touched.
- If the wound starts to discharge pus.

## Contact details

- Contact your GP if you need advice (if your child is well you do not need to see your GP).
- You can contact Ward 10 at anytime for advice on **0116 258 5362**.
- If you need to be seen urgently please go to the Emergency Department.

If you have any questions, write them down here to remind you what to ask when you speak to your nurse/ consultant/ doctor:

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