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Idiopathic urethrorrhagia

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Overview

Idiopathic urethrorrhagia is blood spotting or hematuria usually in prepubertal boys.

Pathophysiology

Idiopathic urethrorrhagia is poorly described in literature and the etiology is still unknown. Based on cystoscopy performed on some patients, bulbar urethral inflammation was noted. This inflammation is likely the source of bleeding and hematuria. Infectious etiology is unlikely in these patients since urine cultures are negative and patients do not present with systemic symptoms.

Clinical presentation

The only symptom present in idiopathic urethrorrhagia is painless hematuria or blood spotting found in the underwear. Patients usually deny dysuria, frequency or urgency. They do not have fevers or complain of any pain. The hematuria is intermittent ranging from daily to weekly occurrences. Hematuria is usually noticed toward the end of the stream and is pink or red in color.

Differential diagnosis

It is important to consider other causes of hematuria before making the diagnosis of idiopathic urethrorrhagia. Hematuria can be caused by urinary tract infections, bacterial or viral urethritis, urethral stricture, kidney stones, trauma, glomerulonephritis, or other vascular or structural causes.
**Diagnostic evaluation**

Idiopathic urethrorrhagia is a diagnosis of exclusion. The initial evaluation should be directed toward more serious causes of hematuria. Labs include CBC, BMP, urinalysis, urine protein and urine creatinine. A renal ultrasound would evaluate for structural abnormalities. If all testing is negative and the patient is otherwise healthy, the diagnosis of idiopathic urethrorrhagia can be made. Endoscopic evaluation is not recommended upon presentation. If hematuria persists for years, further investigation may be warranted to evaluate for urethral stricture.

**Treatment**

Urethrorrhagia is a self-limiting, benign disorder and therefore there is no treatment.

**Recommended Reading**
