

Penile Urethroplasty **陰莖尿道整型術**

Introduction

Common causes of penile urethral stricture include hypospadias, Lichen sclerosus et atrophies, post gonococcal urethritis and idiopathic.

Patients with urethral stricture will have difficulty in voiding and may even develop retention of urine. It can develop other complications including fistulation and urinary tract infection.

Penile urethroplasty is open reconstruction of the stricture to restore the continuity and patency of the urethra.

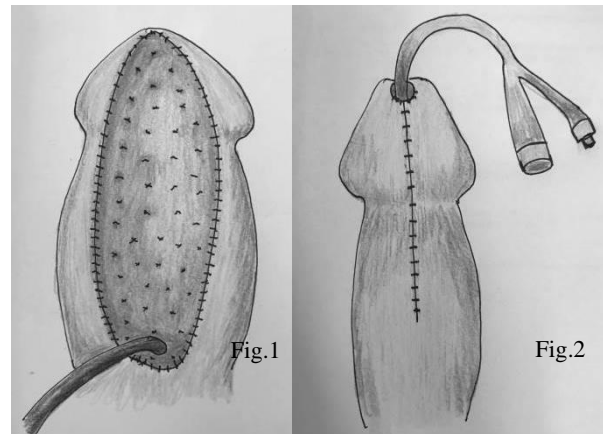
The procedure

When the penile urethral stricture was simple and straightforward, it can be repaired by stricturotomy and buccal mucosal patch.

But if the stricture is complex, it needs to be repaired in a staged procedure.

First stage urethroplasty

The stricture segment is cut open; the diseased part is resected and patched with a buccal mucosa. If the buccal mucosa heals (takes) well, then the second stage surgery can be performed at least six months later (Fig.1).



Second stage urethroplasty

The opened urethra will be rolled up again to make a tube. Urinary catheter will be kept at least three weeks. (Fig.2)

Procedure Specific complications

After 1st stage urethroplasty

- Bleeding or haematoma and infection can cause graft contracture, which may lead to penile curvature. This will be corrected in the second stage urethroplasty

- Complications from the harvest site:
 - Degree of tightness with mouth opening
 - Hairline scar or ridge inside cheek
 - Bleeding
 - Numbness of lower lip
 - Problems with denture fitting

After second stage urethroplasty

- Wound infection or recurrence may result in fistula formation and need further operations to repair the fistula.
- Post void dripping of urine. Patient can try the maneuver such as perineal message to reduce post void drip.
- Urethral diverticulum / saccule after enlargement of the urethral diameter.
- Recurrent stricture in long term. Recurrence rate can range from 10 to 40% depending on the underlying causes.
- Erectile and ejaculatory dysfunction.

Preparation before the procedure

- Urine will be saved for culture and any urinary tract infection needed to be treated before surgery.
- If the stricture is too severe and results in urinary retention, suprapubic catheter is required to drain the bladder before surgery

Care after the procedure

First stage urethroplasty

1. Hospital stay usually will be around five to seven days
2. The urinary catheter need to keep for around five days to one week until the graft stabilized

Second stage urethroplasty

1. Urinary catheter need to keep for around 3 weeks
2. No need to take off the stitches

Follow up

Patient will be followed up in the clinic and flow rate will be checked regularly. If symptoms recur, more investigations include cystoscopy or urethrogram will be needed.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information, please contact your doctor.