

ONE STAGE REPAIR IN PERINEAL HYPOSPADIAS WITH UTILISATION OF URETHRAL PLATE AND MIDLINE SKIN

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Objective: Penoscrotal and perineal hypospadias poses problem in single stage management, as length of inner prepucial skin flap falls short. So these patients are usually managed in two stages and urethral plate is usually resected for correction of chordee. The objective was to see the feasibility & results of one stage urethroplasty in perineal hypospadias by utilizing the urethral plate/ midline perineal skin.

Methods: Thirty-five patients of severe hypospadias were managed with age varying from 2 to 23 years and mean age of 11.5 years. The chordee was corrected penile degloving and mobilization of urethral plate with corpus spongiosum after transecting at corona. And length of deficient urethra measured. It varied from 5.5cm -13 cm in our series with an average length of 8.5 cm. The major portion of the deficient urethra was constructed by tube from inner prepucial skin and a second tube was constructed by tubularization of urethral plate with spongioplasty or by utilizing the midline skin. Glanuloplasty was done raising two glanular wings. The anastomosis was buried in the midline and bifid scrotum was made in a single scrotum further covering the anastomosis

Results: Eight patients had sufficient length of inner prepuce for neo urethra, nine patients required urethral tubularization with spongioplasty, and 18 patients required addition of midline skin flap/tube. The overall complication rate was 22.22% with fistula 11.11%, stricture 7.38% and meatal stenosis 3.7%. Three patients required second surgery for anastomotic stricture & fistula. One patient each had internal urethrotomy, dilatation of urethra and meatal dilatation.

Conclusion: Mobilization of urethral plate along with corpus spongiosum will correct the chordee and its tubularization with spongioplasty makes a normal urethra, which is sufficient to cover the deficient length after inner prepucial skin flap tube. In case of narrow / short urethral plate midline non-hair bearing skin can be utilized to have second tube to complete the urethroplasty in one stage.

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