URETHROPLASTY SHOULD BE THE INITIAL TREATMENT FOR FEMALE URETHRAL STRICTURES

Introduction

Bladder outlet obstruction is an uncommon cause of lower urinary tract symptoms in women. These patients usually undergo several urethral dilations or internal urethrotomies. We reviewed our experience with primary urethroplasty for female urethral strictures.

Design

Seventeen patients (23-67 years old) with mid- to distal urethral stenosis underwent urethroplasty between 2004 and 2010. Diagnosis based on history, pelvic examination, and uroflowmetry. Two patients had recurrent bladder tumor resections, 1 had repeated urethral trauma due to penile-vaginal discordance, 3 had previous synthetic mid-urethral sling procedures, 2 had diverticulectomy, and 1 had traumatic stone extraction. Etiology was unidentified in 8 patients. Seven patients had previous urethral dilations and internal urethrotomies. Ten were repaired primarily.

Results

Ten patients underwent vaginal inlay urethroplasty which utilizes a vaginal flap raised from the anterior wall with an inverted U incision, and advanced into the stricture that is incised at 6 o’clock until healthy urethra. Distal stenotic urethra was augmented with a mucosal flap that was raised from the proximally dilated urethra in one patient. Anterior buccal mucosa graft reinforced with a Martius flap was used in 2 patients who had previous sling procedures after urethrolysis and incision of the stenotic distal urethra at 6 o’clock. Two patients received ventral free buccal mucosa graft due to atrophic vagina. Circular buccal mucosa graft was used for distal neo-uretra following excision of strictured distal urethra in two patients. No recurrence or fistula was evident with symptomatic and uroflowmetric improvement at a mean follow-up of 27 months.

Conclusion

Urethroplasty should be the first-line management in female urethral strictures. Proper technique should be chosen based on etiology and condition of local tissues.

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Was this study approved by an ethics committee?  No
This study did not require ethics committee approval because  The study presents data from patients operated in our clinic. All patients gave informed consent and institutional review board approval was obtained.
Was the Declaration of Helsinki followed?  Yes
Was informed consent obtained from the patients?  Yes