

## ONLAY DORSAL VAGINAL GRAFT FOR FEMALE URETHRAL STENOSIS

### Introduction

Female urethral stenosis is commonly treated with dilatation and cold knife urethrotomy .Both these procedures are associated with high recurrence rate.We present our technique of dorsal onlay free vaginal graft for such patients.

### Design

We have done this surgery on eleven patients.All had history of prior intervention in form of metallic urethral dilatation.

Pre operative assessment included history of voiding LUTS,poor maximum urine flow(<10ml/sec),voiding cystourethrogram showing dilated post urethra and calibration of urethra (less than 12 FR).

Calibration is done with 16 FR Foley catheter to assess proximal limit of stricture which is then replaced with 6-8 FR infant feeding tube to facilitate dissection of urethra dorsally. Urethra is dissected dorsally .Proximal and distal limit of stricture sagement is dissected and stenosed segment of urethra is incised on dorsal surface by stab knife till proximal and distal patulous healthy segment of urethra is reached. Urethrotomy can be complete if stenosis is upto distal urethra.Size of defect is measured and free vaginal graft is taken from lateral vaginal wall.Donor site is closed .Vaginal graft is placed as onlay graft over urethrotomy and fixed with PDS 4-0 . 16 FR perurethral catheter is left for 14 days. Follow up of patient is done with history and uroflow.

### Results

We have done this procedure in 11patients. Our follow up is from 3 months to 3 years. All patients are voiding well without intermittent need of metallic dilatation except one and none of our patients have stress urinary incontinence.

All patients had subjective improvement in symptoms. Post-operatively, calibration improved from 8.75 Fr to 16 Fr, Qmax from 5.4 ml/sec to 18.4 ml/sec and none had postvoid residue greater than 50 ml except one. None of patients had stress urinary incontinence. There were no immediate or delayed consequences like infection or bleeding.

### Conclusion

Dorsal onlay free vaginal graft urethroplasty has given good results and is a good option for females with urethral stenosis

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<b><i>Is this a clinical trial?</i></b>	<b>No</b>
<b><i>What were the subjects in the study?</i></b>	<b>HUMAN</b>
<b><i>Was this study approved by an ethics committee?</i></b>	<b>Yes</b>
<b><i>Specify Name of Ethics Committee</i></b>	<b>Sanjay Gandhi Post Graduate Institute Of Medical Sciences</b>
<b><i>Was the Declaration of Helsinki followed?</i></b>	<b>Yes</b>
<b><i>Was informed consent obtained from the patients?</i></b>	<b>Yes</b>