

## HYPOSPADIAS REDO, WHAT TO DO? A COMPARATIVE STUDY BETWEEN TIP URETHROPLASTY AND SINGLE STAGE DORSAL INLAY BUCCAL MUCOSA GRAFT WITH TUBULARIZED INCISED URETHRAL PLATE TECHNIQUE FOR COMPLEX HYPOSPADIAS REOPERATIONS.

### Hypothesis / aims of study

In current practice hypospadias repairs are performed as outpatient procedures with high success rate but treatment of patients with failed hypospadias repairs can be challenging

### Study design, materials and methods

The study was designed to compare the tubularized incised plate (TIP) urethroplasty and single stage dorsal inlay buccal mucosa graft with tubularized incised plate technique (Snod – graft) for complex hypospadias re-operations.

Fifty-nine patients with previous 1 – 5 failed hypospadias repair were enrolled in the study, age ranging from 38 months to 29 years. Complete dehiscence was seen in 40 cases while urethral stricture was seen in 19.

### Results

Group 1 included 37 patients TIP procedure was done to all of them and 22 patients in group 2 were operated using single stage dorsal inlay buccal mucosa graft ( BMG )with tubularized incised plate technique.

### Interpretation of results

Success rate was 86.5% in group 1 with 3 fistulas and 2 urethral strictures, and 90.9% in group 2 with only 1 fistula and 1 stricture, which were related to the type of primary repair and the number of failed previous repairs.

### Concluding message

- Previously failed hypospadias repair continues to be a challenge to the Urologist.
- TIP is a satisfactory choice for the repair of failed hypospadias, but can't replace all other hypospadias repair techniques. There is still no single universally applicable technique for the secondary repair of all failed hypospadias.
- The single stage dorsal inlay BMG approach combines the excellent cosmetic and functional results of the Snodgrass technique with BMG. Given its simplicity, versatility, and the low complication rate, it's a valuable option for complex hypospadias reoperations.

### References

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### Disclosures

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