

PP-31 Spongioplasty As A Second Layer Over Urethroplasty In Distal And Midpenile
Hypospadias Patients

Poster Bildiri

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INTRODUCTION: Interposition of healthy tissue over urethroplasty to avoid urethrocutaneous fistula is a common practice during hypospadias surgery. The use of spongy tissue to cover the neourethra is discussed. **MATERIALS AND METHODS:** The results of 85 distal and 56 mid-penile hypospadias patients are evaluated in whom Bhat's modified Y-I spongioplasty was performed. After complete penile degloving, chordee is evaluated and repaired if present. Well-developed spongiosum is dissected above the Buck's fascia starting from lateral sides towards urethral plate. Spongy tissue is dissected enough to be easily sutured in the midline without any tension in a continuous fashion from proximal to distal end. **RESULTS:** Among 141 patients evaluated, urethrocutaneous fistulas occurred in three patients (2,1%). Due to careful and adequate dissection, no additional bleeding or stenosis occurred during mean follow-up of 18 months. Additional complications caused by interposing other healthy tissues such as torsion, acquired chordee, stenosis or skin loss are avoided by spongioplasty. **CONCLUSION:** Spongy tissue is readily available and there is no need for additional harvesting during surgery. There is no additional complication detected due to procedure and urethrocutaneous fistula rate is below reported ratios.

Keywords: hypospadias, spongioplasty