Note: This is general information only and the situation can vary from case to case.



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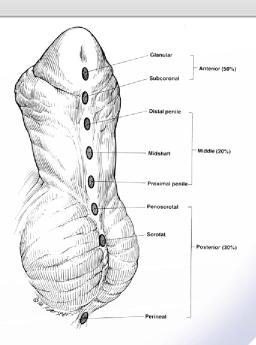
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Hypospadias Repair

'Graft Tissue'



Department of Paediatric Surgery Starship Hospital Auckland



Introduction

Definition:

Hypospadias (Opening below) is an abnormal appearance of the penis, characterised by the abnormally situated opening of the urethra. This may be associated with a curvature of the penis.

Graft Repair:

This technique is used in most severe cases of hypospadias. It is used when 'native' tissue is not sufficient enough to make 'urethra'.

Types of tissues used for grafts:

- 1. Foreskin is used as a free graft
- 2. Lip mucosa (lining) is used as a free graft
- 3. Cheek mucosa (lining) is used as a free graft
- 4. Bladder mucosa (lining) is used as a free graft
- 5. Skin can be used as a free graft.

NB: We do not use option 4 and 5 at Starship.

Details of Lip and Cheek mucosal graft:

- Lining from the lower lip is taken and laid in the area where we wish to make the urethra (on the under-surface of the penis). The raw area on the lip is usually not closed and is left to heal on its own. Children will usually need to drink fluids using a straw initially.
- Cheek lining is taken from the inside of the cheek. This can be taken from one or both sides. This is usually closed with absorbable sutures.

Potential problems with graft repairs

There can be problems in donor site or the recipient site.

The donor site may not heal well or in case of the lip, it can alter the smile a little bit. This may be temporary or permanent. The cheek site has a small chance of injury to one of the salivary ducts.

The recipient site outcome is dependent on how well the graft adapts to the new area. It depends on the 'take' in the new area, which needs to develop a new blood supply and survive in the new area. The graft may only partially 'take' or it may fail completely. In both cases your child will need to have the procedure done again.

Stages of repair:

If a graft repair is required, the first stage is to lay the graft and allow it to take.

The second stage is undertaken six months later, if the graft takes, to try and make a tube of urethra from it.

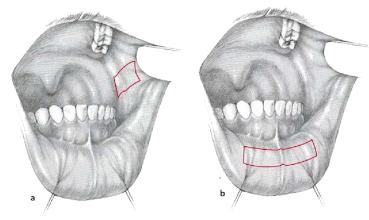


Fig 22.2a,b Harvesting of buccal mucosa

What happens:

Admission is usually the afternoon before the surgery. Your child will be given an enema (to empty the bowel) and then will need to have a bath using an antiseptic cleaning solution.

After the operation:

- Your child will have a catheter which drains urine from the bladder into a bag.
- Your child will need to remain on bed-rest for at least 48 hrs and needs to be encouraged not to move around too much. This is to allow the graft a good chance of being 'taken up' in the new area.
- After the 48 hrs bed-rest your child will be able to go home with the catheter in place and on antibiotics.
- Your child will need to return a week later for a change of dressing and removal of the catheter.

After the removal of the catheter your child should not have bath for 48 hours. You will need to apply an antibiotic ointment, which will be prescribed, to the area of the graft. This needs to be done three times a day for three weeks. After the three weeks we encourage you to apply Vaseline to the area. A clinic appointment will be made for three months time and at this stage further treatment will be planned.

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