

## AB009. The tactics of procedure selection for the treatment of failed hypospadias repair

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**Abstract:** Most patients with failed hypospadias have complicated clinical manifestations, including urethral strictures, chordee, multiple fistulas, and diverticula. The treatment for failed hypospadias repair is one of the most challenging procedures for the reconstructive urologist, as its success requires both a functional urethra and a cosmetically acceptable glans appearance. In this reporter, we introduced a tactics of procedure selection of the treatments for failed hypospadias repair include a variety of surgical techniques using different types of tissues for substitution, such as local skin flaps, free mucosal grafts. In cases with penile skin scar, scarred urethral plate or fistulas that lacked an available original urethra or had a shortage of

the local foreskin, lingual mucosa graft (LMG) substitution urethroplasty was the only choice for surgical procedures. In our experience, the modifier TIP technique (tubularized incised plate technique and an LMG inlay urethroplasty) was also a suitable and effective technique for patients with no penile skin scar or scarred urethral plate, providing a satisfactory success rate. One-stage onlay or inlay urethroplasty with LMG may be an effective option to treat the patients with less available skin after failed hypospadias repairs; LMG harvesting is easy and safe, irrespective of the patient's age. A vascularized fascia needs to be transplanted to cover the neourethra or to be inserted between the neourethra and sutured skin if possible. If there is no suitable fascia in the penile shaft, the fascia can be harvested alternatively from the scrotum.

**Keywords:** Failed hypospadias; repair; urethroplasty; lingual mucosa graft (LMG)

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