



EVALUATION OF FUNCTIONAL AND OBJECTIVE OUTCOMES AND PATIENT-REPORTED QUALITY OF LIFE FOLLOWING AN ANTERIOR URETHROPLASTY USING A BUCCAL MUCOSAL GRAFT

Dr. Raghuram Ganesh

Urology Resident, Chettinad Hospital.

Dr. P. Periasamy*

Professor and Head of Department of Urology, Chettinad Hospital.
*Corresponding Author

KEYWORDS :

INTRODUCTION:

Male urethral stricture disease, a prevalent urological condition, involves urethral narrowing due to scar tissue, causing obstructive symptoms and impacting quality of life. Minimally invasive treatments like urethrotomy and dilatation often fail due to high recurrence rates. Definitive surgical options, such as buccal mucosal urethroplasty, offer superior, long-term outcomes, particularly for complex cases

OBJECTIVES:

This study explores the effectiveness and outcomes of buccal mucosal graft (BMG) urethroplasty in managing anterior urethral strictures, particularly complex cases such as pan-urethral strictures. It evaluates functional outcomes, patient quality of life, and the role of BMG in achieving durable results in challenging clinical scenarios.

METHODS:

This study enrolled 20 male patients who underwent buccal mucosal graft urethroplasty at Chettinad Super Speciality Hospital (2017–2024). Pre- and post-operative evaluations included uroflowmetry, urethrograms, laboratory tests, and quality-of-life questionnaires. Data analysis employed frequencies, means, Paired t-tests, and Chi-Square tests to assess outcomes, with follow-ups at 3 and 6 months to evaluate recovery and surgical success.

RESULTS:

This study evaluated 20 patients undergoing buccal mucosal graft (BMG) urethroplasty, demonstrating its significant benefits in managing anterior urethral strictures. Older age and comorbidities, especially diabetes, were associated with higher complication rates. However, BMG urethroplasty showed remarkable outcomes, with significant improvements in urinary flow rates (Qmax: 9.3 to 24.3 mL/s), reduced residual urine volumes (PVR: 134.8 to 52.8 mL), and enhanced quality of life scores (23.2 to 10.1) within six months post-surgery.

CONCLUSION:

This study confirms buccal mucosal urethroplasty as a highly effective treatment for anterior urethral strictures, with significant functional and quality-of-life improvements. High success rates and minimal complications were observed, but the small sample size and short six-month follow-up limit generalizability. Future research should focus on long-term outcomes and broader applicability to ensure sustained efficacy and clinical relevance.

