

البحث الرابع

Dorsal onlay urethroplasty using lingual mucosal grafts for lichen sclerosis anterior urethral strictures repair: Long-term outcomes

Objective: To evaluate the long-term outcomes of dorsal onlay urethroplasty using lingual mucosal graft for repairing urethral strictures associated with genital lichen sclerosis.

Methods: This study included 36 patients who had lichen sclerosis long anterior urethral strictures that were managed with dorsal onlay urethroplasty using lingual mucosal graft, and were followed up ≥ 5 years. Preoperatively, we measured the maximum urinary flow rate and the International Prostate Symptom Score, then every 3 months in the first year, and annually thereafter. During follow up, patients with obstructive symptoms were subjected to urethrography and/ or urethroscopy. A successful urethroplasty was defined as normal voiding and no need for further intervention.

Results: Of the 36 patients, two were lost during the follow up, thus 34 patients were involved in the assessment. After lingual mucosal graft urethroplasty, there were significant improvements in maximum urinary flow rate and International Prostate Symptom Score ($P < 0.0001$). This improvement was sustained during the 5-year followup period. The median follow-up period was 66.5 months (interquartile range 64– 70 months). The overall success rate in this study was 88.2%. Postoperative complications that required intervention were reported within the first year in four (11.8%) patients. Oral site complications were mild in the early postoperative period with no long-term complications.

Conclusions: Dorsal onlay urethroplasty using lingual mucosal graft is a reliable and durable procedure for repairing lichen sclerosis urethral stricture. It provides a long-term success rate with few failures occurring within the first year. Lingual mucosal graft harvesting is associated with minor, immediate oral complications, and no long-term morbidity.