

“Minimally Invasive Urethroplasty” (Kulkerni’s Technique): A Single Stage Reconstruction of Long Segment Inflammatory Urethral Stricture: A New Horizon of Urethral Reconstruction

Introduction and Objective: Urethral stricture disease is a major cause of obstructive uropathy and progressive renal upper tract deterioration specially in younger age group. Various surgical treatments are available now a day. In recent years “minimum invasive urethroplasty” (Kulkerni’s technique) has gain its popularity as curative surgical option in single stage long segment inflammatory urethral stricture reconstruction with excellent long-term outcome.

Materials and Methods: This is a prospective study; done in the Department of Urology Bangladesh medical college Hospital and some private clinics of Dhaka city from Dec’ 10 to Feb’12. The sample size was n – 30. All cases were long segment ($\geq 5\text{cm}$) inflammatory anterior urethral stricture. The approach was perineal. The whole length of penis has been delivered by reverse degloving technique. The whole stricture segment was dissected in one side keeping intact vascularity to other side. It was then de-tubularised and harvested buccal mucosa was used for dorsal substitution as free graft. The urethra then re-tubularised around a Foley catheter. Perineal wound can be closed with or without drain.

Results: Post-operative recovery was excellent in all the cases. Mild urethral collection was noticed in all cases; expressed gently in regular basis. Its culture appeared negative. Catheter was removed at the end of third week. Normal voiding was ensured in all the cases. All patients were followed routinely with urine R/E, C/S and uroflometry. The mean period of follow-up in our cases was 08 months. The overall outcome was excellent.

Conclusions: Urethral stricture disease is an ancient disease. Once it was considered as lifelong morbidity. The misery can be minimized to complete cure with Kulkerni’s techniques of “Minimally invasive Urethroplasty”.