## Management of Recurrent Bulbar Urethral Stricture with a New Stent: Allium

**Introduction and Objectives:** Urethral stents have a reported efficacy in patients with recurrent urethral structures. We report our experience with a new bulbar urethral stent (BUS) Allium (Allium Medical, Caesareal Industrial Park, Israel) for treatment of patients with recurrent bulbar urethral stricture.

**Materials and Methods:** Allium endoprosthesis was placed in 57 patients for obstruction caused by recurrent bulbar urethral strictures. All patients were 2-5 times (mean 3,6) treated endoscopically before the BUS placement. The device is always placed at the just distal part of the external sphincter. However the dynamic sphincteric segment of the stent prevents sphincteric dysfunction. The success criteria after removal of the BUS were: no evidence of stricture on urethrogramorendoscopy, urinary peak flow greater than 15ml/sec, and no recurrent urinary tract infection.

**Results:** Allium BUS is intended for temporary use, so stents were removed after 4 to 14 months (mean 8.2) after placement. Migration and complete obstruction of the stent was the reason for the early removal in one and three patients respectively. The placement and removal of the device is very easy. Median follow-up after removal of the device was 8,3 months (4 to 16). Allium BUS benefits most of our patients. The success rate after removal of the stent was 90%. Six patients (10%) required additional therapy.

**Conclusion:** Our results suggest that therapy with Allium BUS is a good, noninvasive and new option for patients suffering from recurrent urethral stricture.