

Initial experience with fibrin sealant in pendulous urethral reconstruction. Is early catheter removal possible?.

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Abstract:

Purpose: We assessed whether fibrin sealant promotes early catheter removal after pendulous urethral reconstruction. **Materials and Methods:** Between 1997 and 2003, 43 men with complex stricture disease underwent pendulous urethral reconstruction by a single surgeon (AFM). In 18 consecutive cases with a mean stricture length of 7.24 cm from 2000 to 2003 fibrin sealant was applied over a ventral onlay anastomosis performed with running 5-zero polydioxanone suture. Results were compared with those in 25 men who underwent the procedure without fibrin sealant from 1997 to 2000, who served as a control group (mean stricture length 8.30 cm, $p = 0.418$). Catheter duration was recorded after anastomosis integrity was radiographically confirmed. **Results:** All 18 patients with sealant were completely healed within 14 days, which was significantly shorter than in controls ($p < 0.001$). In the sealant group increased stricture length was associated with longer catheter time ($p = 0.677$). Our impressions were that patient satisfaction was enhanced by early catheter removal, and postoperative penile edema and ecchymosis were decreased in the fibrin sealant group. **Conclusions:** Fibrin sealant appears to promote early catheter removal and enhanced wound healing after pendulous urethral reconstruction.