

# Hypospadias repair: the seagull meatoplasty

A. H. N. ROBERTS and J. C. DICKINSON

Department of Plastic Surgery, Stoke Mandeville Hospital, Aylesbury

**Summary**—An operation is described which has been used in six cases to produce a single stream of urine in patients who were spraying following hypospadias repair. It has also been used in four patients to advance the meatus terminally.

On occasions following hypospadias repair the patient does not produce a single stream of urine. In the early post-operative period this is common and is due to oedema. In most cases this will settle in the first few weeks or months, but may persist, particularly if primary healing did not occur at the time of the original operation. This double stream or severe dribbling is unacceptable, but can be difficult to correct. A successful operation must produce a terminal neo-urethra which narrows towards the tip in the manner of a fire hose.

## Method

Provided there is sufficient skin on the ventral surface of the penis, it is possible to advance this skin to produce the ventral wall of the distal neo-urethra. The design of the operation is shown in Figures 1-3. The areas shown cross-hatched are de-epithelialised, and can be seen to have the shape of two seagulls flying back to back. It is important to realise in the design that the distances A and B should be equal, and that  $A + B$  is the circumference

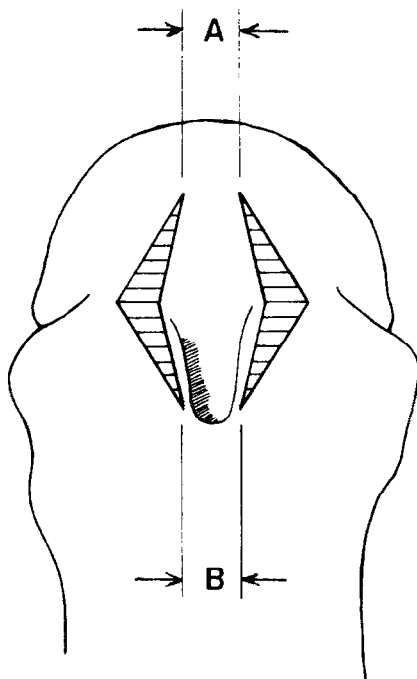


Fig. 1

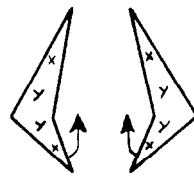


Fig. 2

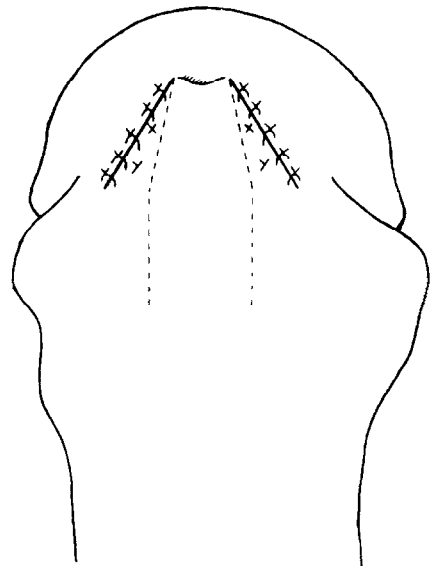


Fig. 3

Figure 1—Design of the operation. Figure 2—De-epithelialised area folded up on itself about the mid-line. X X and Y Y show the position of insertion of two deep sutures on each side. Figure 3—Final result. The hatched line shows the position of the terminal neo-urethra.

of the new meatus. The de-epithelialised area is folded up on itself, and the points X-X and Y-Y mark the position of deep sutures. It is important that the skin is not penetrated whilst these sutures are being placed, or a fistula could result. A second layer of superficial sutures is then placed along each side. The sutures used are absorbable Vicryl® or Dexon®, and the size is dependent on the age of the patient: 4/0 is suitable for an adult and 6/0 for a child under 5. No catheter, diversion or dressing is required, and the patient is discharged 1 to 2 days post-operatively.

### Results

The operation has been done on six patients with spraying, with an age range of 4 to 20. The opera-

tion has also been used to advance terminally the meatus in four patients who had been admitted for the tidying of a "frilly willy". In these cases there was sufficient ventral skin to advance the meatus on to the glans as part of the tidying-up operation. All 10 patients healed with no problems, and had a good stream of urine post-operatively.

### The Authors

**A. H. N. Roberts, MA, BSc, BM, BCh, FRCS**, Consultant Plastic Surgeon.

**J. C. Dickinson, FRCS(Ed)**, Senior Registrar in Plastic Surgery. Department of Plastic Surgery, Stoke Mandeville Hospital, Aylesbury, Buckinghamshire HP21 8AL.

Requests for reprints to Mr Roberts at the above address.