

Proximal Fistula Repair Not More Likely to Fail Compared to Distal Fistula Following Hypospadias Repair





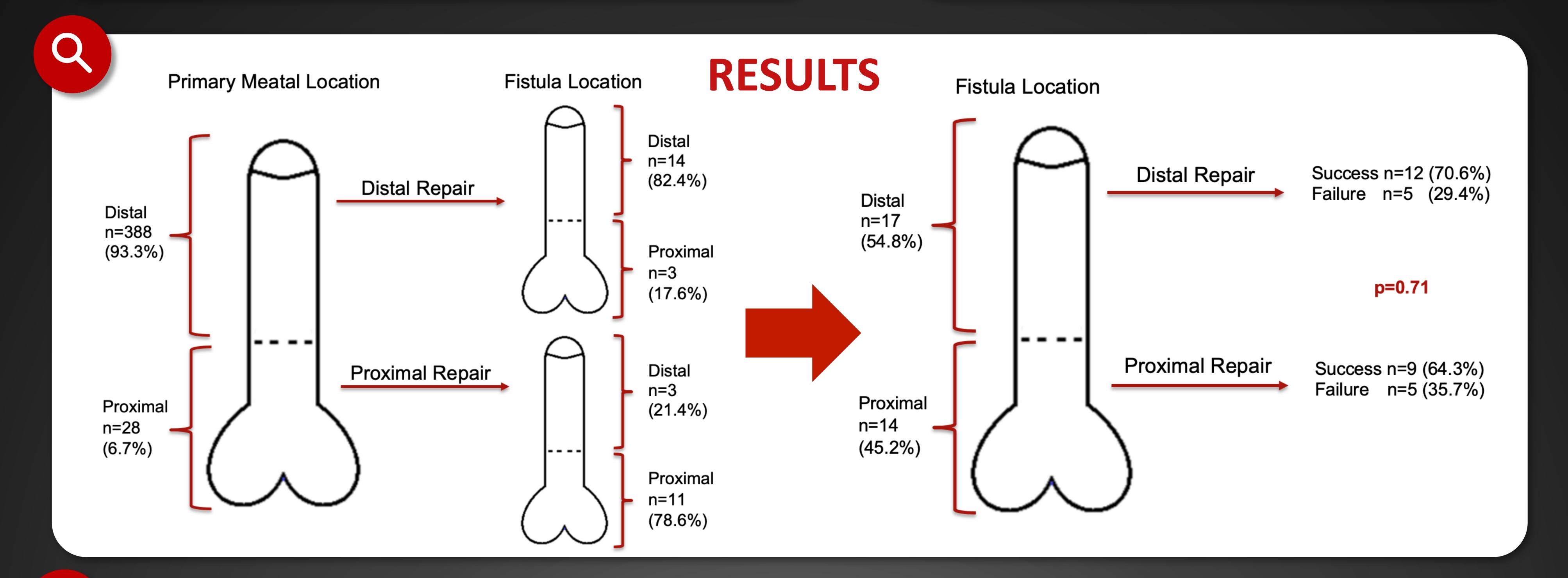
BACKGROUND

- Fistulae are the most common complication after hypospadias repair
- Proximal hypospadias repairs have at least 2x complication risk compared to distal
- It is unknown if proximal fistula have increased risk of failure following repair



METHODS

- Retrospective review of all hypospadias repairs from 2014 2017 at our institution
- Surgical characteristics, and hypospadias/fistula location recorded
- Univariate and multivariate analysis performed



Variable	Unadjusted		Adjusted	
	Odds Ratio (95% CI)	p-value	Odds Ratio (95% CI)	p-value
Fistula Proximal vs Distal	0.75 (0.17 – 3.40)	0.71	0.94 (0.17 – 5.04)	0.94
Suture Polyglactin vs Polydioxanone	0.57 (0.12 – 2.85)	0.49	0.37 (0.02 – 9.01)	0.54
Interposition layer Yes vs No	2.38 (0.28 – 19.92)	0.43	7.26 (0.37 – 143.71)	0.192
Stented Yes vs No	0.92 (0.20 – 4.31)	0.92	0.68 (0.12 – 3.99)	0.67
Microscopic vs Loupes	0.50(0.11-2.31)	0.38	0.50 (0.04 – 6.09)	0.58

Table 1. Association between surgical and patient characteristics for successful fistula repairs



TAKE AWAY

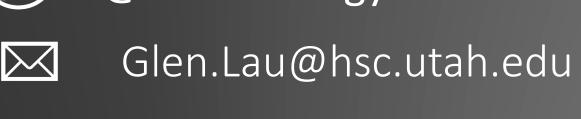
Proximal and distal
urethrocutaneous fistulae after
hypospadias repair have
comparable rates of successful
closure







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