(PD46-8) THE BUCCAL BELT: A BUCCAL MUCOSAL GRAFT FOR RECURRENT PENILE ADHESIONS IN PATIENTS WITH LICHEN SCLEROSUS

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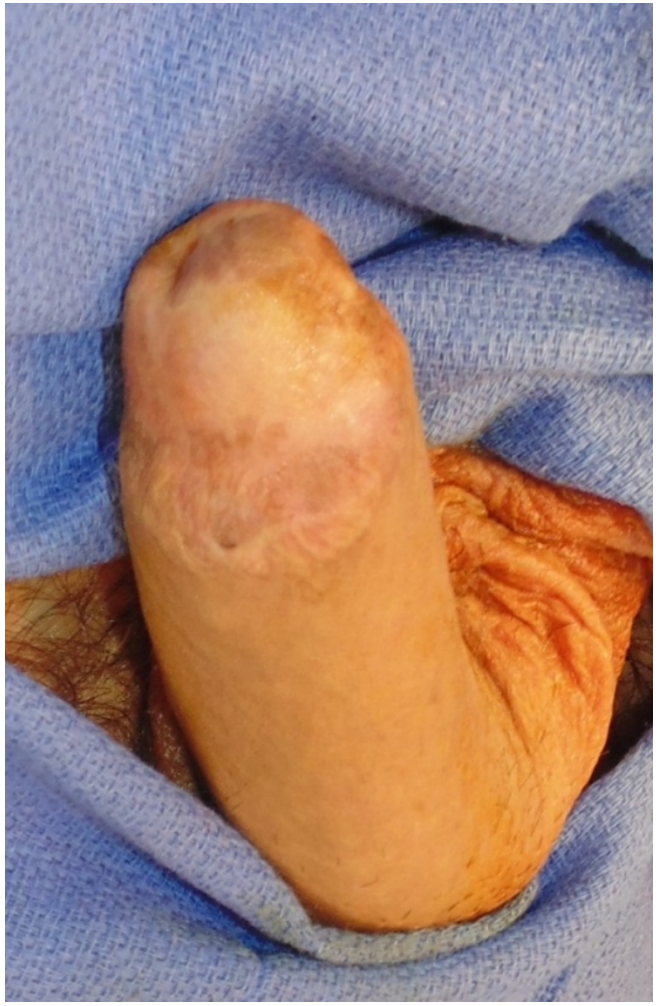
BACKGROUND:

- Recurrent penile adhesions (RPA) difficult to treat
- Patients experience: pain, functional & esthetic disturbances, emotional distress[1,2]
- Treatment options limited:[3,4]
  - Repeat circumcisions
  - Split thickness skin grafting



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BACKGROUND:

- Buccal Mucosal Graft (BMG) - Good success with lichen sclerosus (LS) stricture disease [5,6]
- Case series describe BMG for glans reconstruction
  - Following traumatic circumcision in neonates [7,8]
  - Penile cancer [9]

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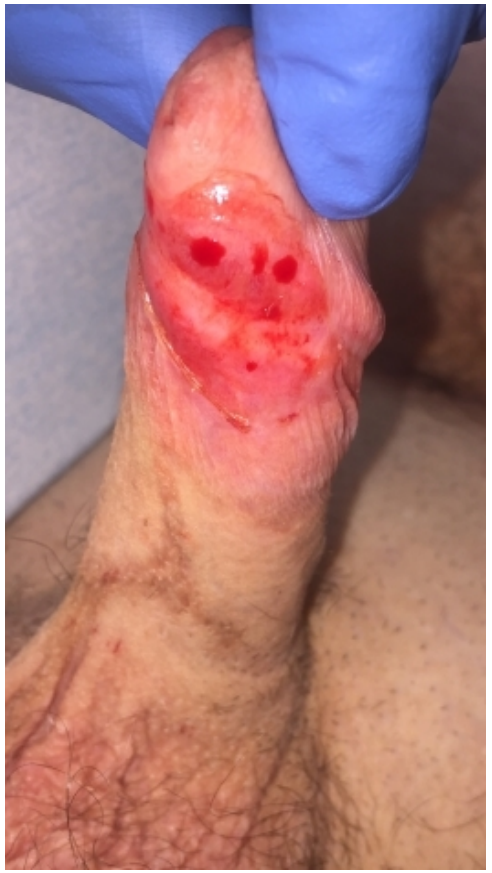
OBJECTIVE:

To present a novel technique for treatment of RPA using a sub-coronal buccal mucosal graft (BMG) resurfacing

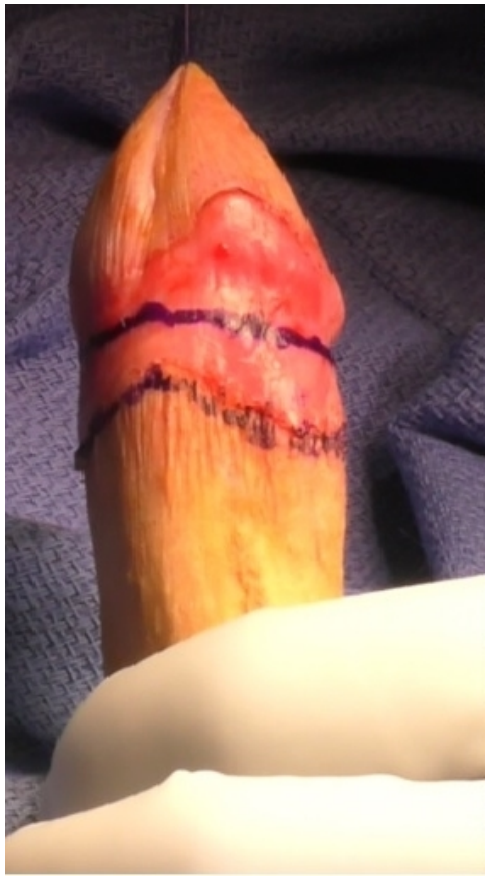
HYPOTHESIS:

A sub-coronal buccal mucosal graft (BMG) resurfacing with be a feasible, durable and reproducible treatment option for RPA.

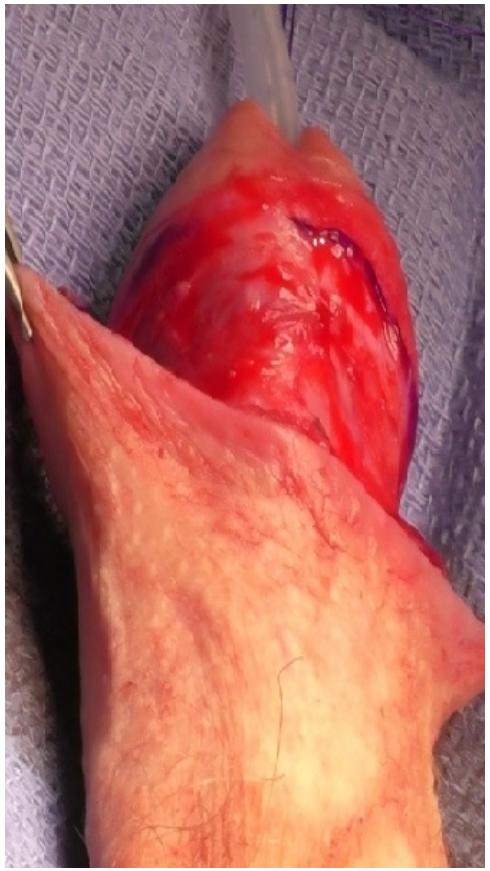
PROCEDURE:



Adhesions

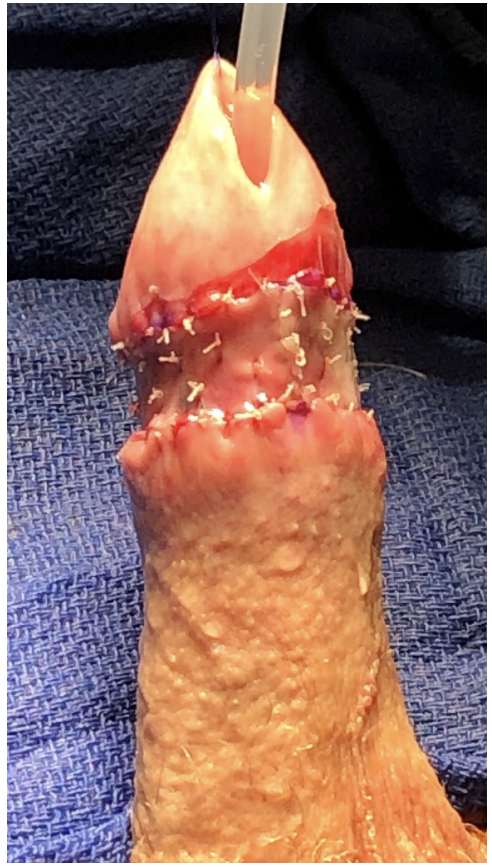


Defect Demarcated

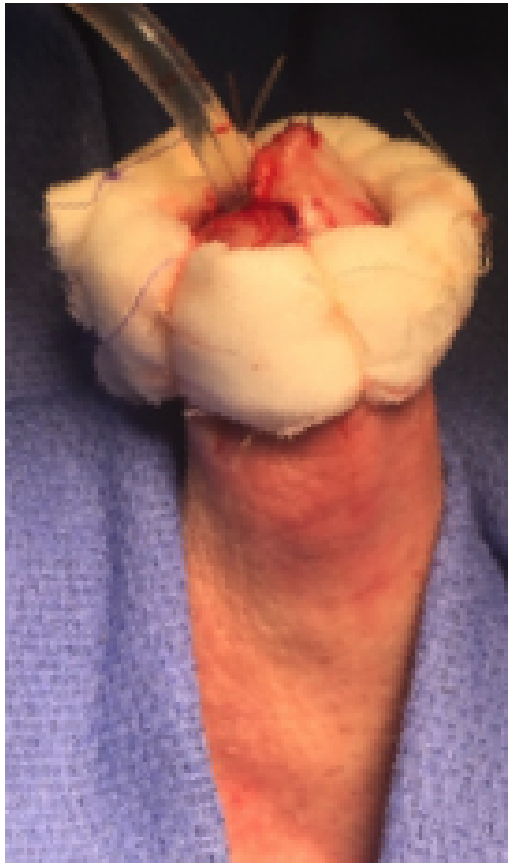


Excision Completed

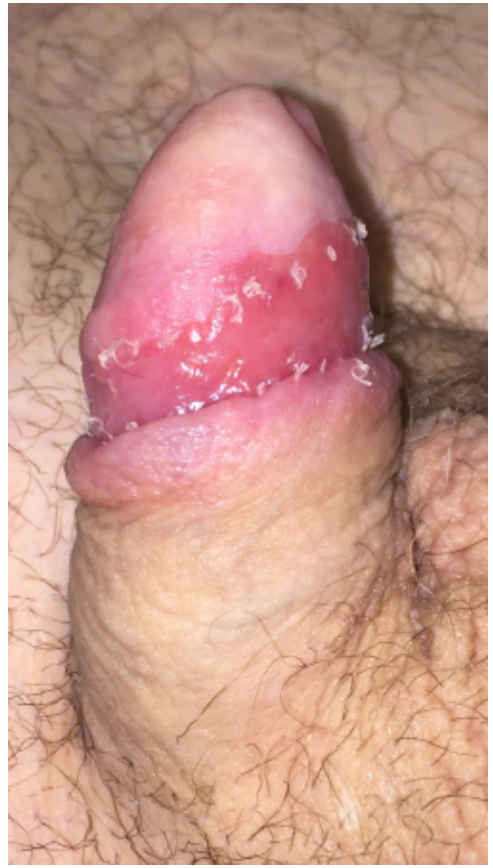
PROCEDURE:



BMG in Place



Tie-over-dressing



1 week follow up

METHODS:

- Retrospective, international multi-institutional study
- Exclusions criteria: <12mn follow-up
- Primary Outcomes:
  - Recurrence of the adhesions
  - Graft failure
  - Peri-operative data: surgical time, length of stay, complications.
- Secondary Outcomes: Patient-Reported Outcomes Measures

RESULTS: *Patient Characteristics*

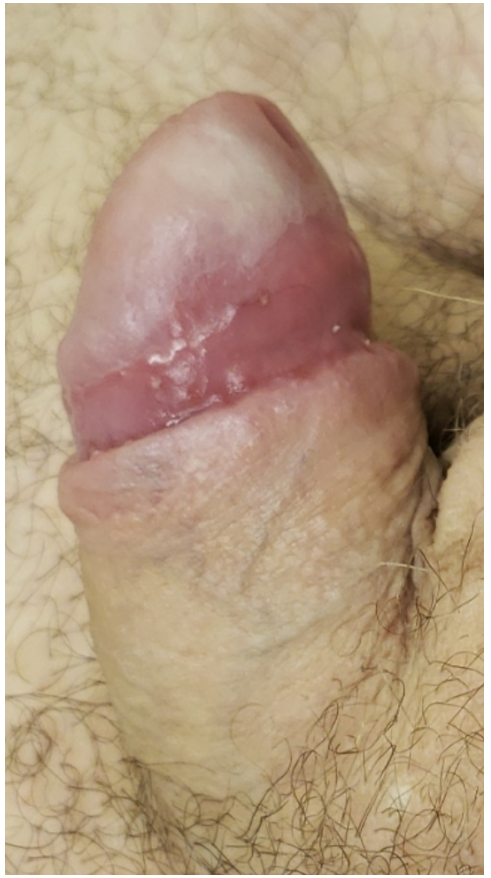
- 6 centers, 25 Patients → 21 included
- Mean Age: 58 (range: 41-74)
- Previous Treatment (100%)
  - Topical Steroids: 10 (47.6%)
  - Circumcision: 20 (95.2%)
  - Multiple Circumcisions: 11 (52.4%)
- Confirmed LS: 15 (71.4%)
- Stricture Disease:
  - Previous repair: 4 (19%)
  - Concurrent repair: 11 (52.3%)

RESULTS: *Surgical Outcomes*

- Surgical Time:
  - Resurfacing only (n=10): 40min (25-60)
  - Resurfacing + stricture repair (n=11): 110min (46-180)
- Hospital Stay: 0.76 days (0-2)
- Complications
  - Clavien 1-2: 1 UTI
  - Clavien 3-5: 0

RESULTS: *Primary Outcomes*

- Mean Follow-up: 18mns (12-61)
- No Graft Loss
- No Recurrence



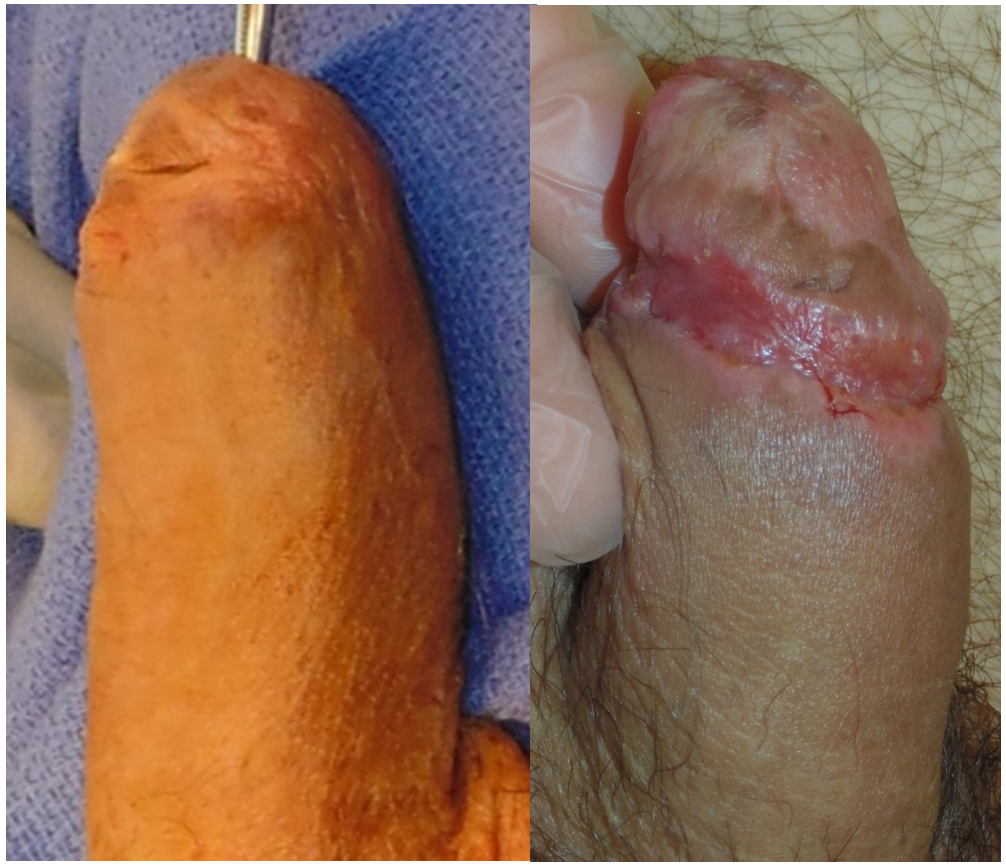
6 week follow-up

RESULTS: *Global Response Assessment*

	Improvement			Neutral	Worsening		
	+3	+2	+1	0	-1	-2	-3
Overall Condition	12 (57.1%)	6 (28.6%)	3 (14.3%)	0	0	0	0
Esthetic Appearance	9 (42.9%)	9 (42.9%)	1 (4.8%)	1 (4.8%)	1 (4.8%)	0	0
Pain with Intercourse	8 (38.1%)	3 (14.3%)	7 (33.3%)	3 (14.3%)	0	0	0
Bleeding w/ Intercourse	8 (38.1%)	9 (42.9%)	1 (4.8%)	3 (14.3%)	0	0	0

RESULTS: *Additional PROMS*

- SHIM: (p Value = 0.003)
  - Preoperative: 14.4
  - Postoperative: 17.0
- Worsening Penile Sensation: 4 (19%)
- Pain with Erections: 0
- Recommend Procedure: 20 (95.2%)
- VAS - Functional Outcome: 9.0 (6-10)
- VAS - Esthetic Outcome: 8.9 (7-10)



5 year follow-up

CONCLUSIONS:

- Sub-coronal BMG resurfacing is feasible and reproducible across institutions
- Initial patient cohort - no recurrence + high satisfaction over short-term follow up
- Prospective study with long-term follow up is warranted

THANK YOU

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