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Original Research Article

The Mesh Graft Technique for the Treatment of Phimosis

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Journal homepage: https://www.easpublisher.com **Abstract:** *Objectives:* Correct the phimosis but preserving the prepuce. *Methods:* using the mesh graft plastic surgical principle often used in extensive 3rd degree burns. *Results:* Excellent aesthetic and functional results. *Conclusion:* the method of choice if one wants to correct the phimosis but preserve the prepuce.

Keywords: Urogenital malformations, phimosis, mesh graft principle.



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INTRODUCTION

Phimosis means an almost closed preputial meatus, a very frequent problem for young males, usually associated with a penis of normal dimensions. Apart from the indications for circumcision due to religious beliefs, and although many times the simple use of progressive foreskin retraction (often associated with corticosteroids) can solve the problem, in some more severe cases of phimosis, surgery becomes mandatory for normal penile function.

MATERIAL AND METHODS

Significant Phimosis can be a motive for great anxiety both for the child and his parents, so it should be corrected as soon as the problem is detected. Some surgeons to assure a more perfect preputial removal prefer to use an appropriate device.



Fig-1: Circumcision, using a gadget for removal of the foreskin

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Fig-2: Final appearance, as in any "classical" circumcision, the skin being sutured with plain cat-gut

The technique we suggest for the correction of phimosis while preserving the prepuce, is inspired in the mesh graft technique used in plastic surgery, namely in burns, when there is not enough skin available for grafting.



Fig-3: Schematic Drawing of the preputial incisions



Fig-4: Schematic Drawing of the "opened" preputial incisions

Surgical Technique

Starting at the most stenosed anterior area, several small (approximately 4mm) non matched superficial incisions of the skin and dartos are performed all around, until one reaches complete disappearance of the constriction, the skin remaining with multiple small open diamond wounds.



Fig-5: Small incisions started at the stenotic prepuce, with the open diamond wounds at operation



Fig-6: Progressively prolonging proximally the preputial skin incisions

One tries to avoid damaging the dartos vessels but, if needed, electrocoagulation is used. In order to avoid restenosing of the prepuce, the penile skin immediately behind the open diamond wounds, is sutured to the pubo-scrotal skin and is to be maintained retracted at least a minimum of 5 days, to allow for complete healing (epithelialization) of the raw preputial surfaces.



Fig-7: "Mesh graft" appearance of the wound



Fig-8: Overcoming of phimosis but still maintaining the full preputial skin

Edema may remain for several days, but when it completely fades away, then the penile look just looks normal and with no phimosis.



Fig-9: Appearance some weeks later

DISCUSSION AND RESULTS

In some patients and when the phimosis is not too severe, a simple dorsal incision on the prepuce (the so-called Estor maneuver) can be used. For complete removal simples surgery can be performed or one can use a special and appropriate device.

A Patient suffering from phimosis is usually treated with foreskin removal, the so-called circumcision. The preputial wound is then closed with separate stitches of a absorbable material, usually plain cat-gut.

With the technique we are suggesting the prepuce can be preserved with an excellent cosmetic and functional result, pleasing patients and Parents. Nevertheless it is important to explain to the Parents that local preputial edema may persist for a long time (simulating a non-existing paraphimosis) but that ultimately will subside, (although at times lasting a long time....). In spite of the sutures placed between penile skin and the peno-scrotal junction it is important to alert the Parents to daily verify the preputial retraction and if needed to do it, even manually, for the minimal time to allow for total epithelialization of the open diamond wounds. The final results are excellent, with a normal looking and functional non-phimosis prepuce, although only recognizable later, what must be stressed to the Parents for their alternative decision.

In the vast majority of phimosis and if one wants to preserve the prepuce, the technique is simple and effective, bringing peace to the Parents and the children.

The mesh graft technique for the treatment of phimosis allows for the integral maintenance of the

preputial skin. On the other end there will not be any functional problems in the future.

Disclaimer

- The paper is a single author piece and presents no conflict of interests
- Conflict of interest (Please disclose all relevant and potential Conflict of interest as described in 4. ETHICAL CONSIDERATION in this guideline) No conflict of interest
- Approval of the research protocol by an Institutional Review Board N/A
- Informed Consent N/A
- Registry and the Registration No. of the study/trial-N/A
- Animal Studies N/A

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