

***Three Minute Article for Parents***

## **Timely surgery for children with hypospadias for better anatomical and psycho-sexual outcome**

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Hypospadias affect 0.2% to 0.7% of live born baby boys in the world. It is associated with cosmetic, social, psycho-sexual and sometimes fertility related issues. Timely surgical reconstruction before the boy is potty trained, that is, around two years of age, is recommended to minimize these issues.

If the anatomy of the penis is simplified, assuming it being composed of top two parallel tubes containing vascular spaces (corpora cavernosa) and a bottom tube containing the urethra (corpus spongiosum), and if the bottom tube becomes shorter in length, the external urethral opening would be placed at a site closer to the body wall (proximal) than expected. This anatomical variation is called hypospadias<sup>1</sup>. In around 60% of hypospadias the urethral opening is distal (placed in the outer half of the penile shaft) while the rest have it proximal (placed in the inner half). Reconstruction becomes more complex when the meatus is placed proximally.

The steps in corrective surgery under general anaesthesia include straightening the bent penis, creation of deficient urethral tube around a urethral catheter and reconstruction of corpus spongiosum, glans penis, penile soft tissue, penile skin and foreskin. The urethral catheter is usually kept in situ for a period of 7-10 days.

Specialized paediatric urological centres around the world recommend reconstruction of hypospadias before the baby is potty trained to facilitate better anatomical growth and to minimise the psychological impacts of hypospadias and surgery related stress<sup>2</sup>. In order to achieve this goal, early paediatric surgical referral is necessary, well before two years of age, considering the waiting lists for surgery in the surgical units in Sri Lanka.

Delayed presentation for surgery is commonly encountered in our practice. A descriptive study of 100 consecutive hypospadias in children presenting to Lady Ridgeway Hospital for Children Colombo found only 31% presenting for surgery before two years of age<sup>3</sup>. Most of the late presentations were

due to lack of parental insight on the effects of hypospadias, and fear of undergoing surgery on the genitalia.

Parents need to understand the impact of uncorrected hypospadias on their son and the importance of timely surgery on this common pathology to facilitate achieving normal anatomical and psycho-sexual development of their child. They should get motivated to seek medical advice early whenever there is a concern on the penile anatomy of their child.

***The take-home message for parents is to bring the affected child to a Paediatric Surgeon as soon as possible, preferably within the first year of life.***

### **References**

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