

UR10 Urethrotomy

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What is a urethrotomy?

A urethrotomy is an operation to treat a narrowing of your urethra (tube that carries urine and semen to the tip of your penis). The narrowing (stricture) is usually caused by scar tissue forming after inflammation, an infection or injury. The operation involves cutting the scar tissue to make your urethra wider.

Your surgeon has suggested a urethrotomy. However, it is your decision to go ahead with the operation or not. This document will give you information about the benefits and risks to help you to make an informed decision.

If you have any questions that this document does not answer, it is important that you ask your surgeon or the healthcare team. Once all your questions have been answered and you feel ready to go ahead with the procedure, you will be asked to sign the informed consent form. This is the final step in the decision-making process. However, you can still change your mind at any point.

What are the symptoms of a narrowing of your urethra?

Your urethra is about 18 centimetres long. A narrowing can happen anywhere along the length of your urethra. This results in the following symptoms.

- The need to pass urine more often.
- Sudden urges to pass urine.
- Having to wait longer than usual before starting to pass urine.
- Slow flow of urine, often with dribbling.
- The urine stream forking or spraying.
- The feeling of not having fully emptied your bladder.

A narrowing can also make you prone to infections, which can keep coming back.

What are the benefits of surgery?

You should get a better flow of urine and improved bladder emptying, and not need to pass urine as often during the night. You should also be less prone to infections.

Are there any alternatives to a urethrotomy?

There is no medication available to treat a narrowing of your urethra and it will not get better.

It is possible to try to treat a narrowing using the following techniques.

- Balloon dilatation – This involves inflating a balloon in your urethra to make it wider.
- Dilators – This involves placing small metal rods, called sounds, into your urethra to stretch the narrowing.

However, these options have poor long-term results.

For most men the aim of a urethrotomy is to improve their lifestyle by relieving the symptoms. However, for a few men a urethrotomy is vital and your surgeon will tell you if this is the case.

More complicated narrowings sometimes need open surgery, where the narrowing is repaired using plastic-surgery techniques. This involves using tissue from other areas of your body such as the lining of your mouth.

What will happen if I decide not to have the operation?

Symptoms can come and go but often the symptoms get worse.

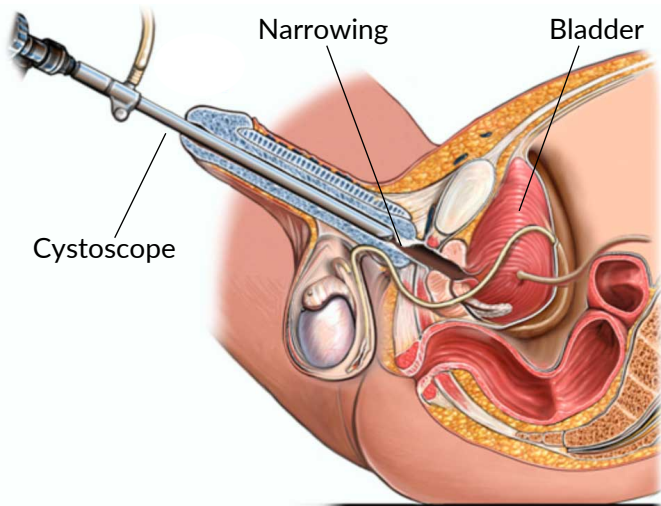
If your narrowing is severe, you will find it difficult to pass urine at all. You may get bladder stones and even develop kidney failure.

What does the operation involve?

The healthcare team will carry out a number of checks to make sure you have the operation you came in for. You can help by confirming to your surgeon and the healthcare team your name and the operation you are having.

The operation is performed under a general or spinal anaesthetic. Your anaesthetist will discuss the options with you. You may be given antibiotics during the operation to reduce the risk of infection. The operation usually takes less than 30 minutes.

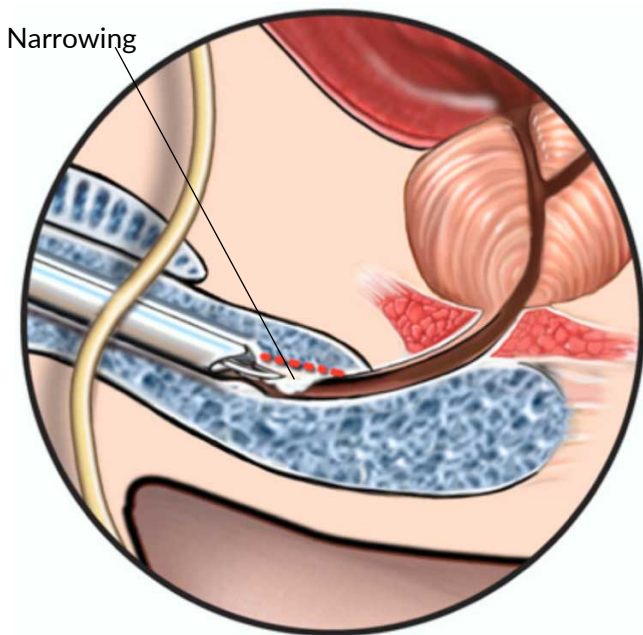
Your surgeon will pass a rigid telescope (cystoscope) into your urethra to examine the narrowing.



A urethrotomy

Your surgeon will usually pass a urethrotome down through the cystoscope.

The urethrotome has a small blade, which your surgeon will use to make a cut in the scar tissue to make your urethra wider. Your surgeon may use a laser to cut the tissue open.



A urethrotome being used to cut scar tissue

Your surgeon may then pass the cystoscope into your bladder to check for any problems.

Your surgeon may place a catheter (tube) in your bladder. This will allow you to pass urine easily, and your bladder to be washed out with fluid to prevent blood clots.

What should I do about my medication?

Make sure your healthcare team knows about all the medication you take and follow their advice. This includes all blood-thinning medication as well as herbal and complementary remedies, dietary supplements, and medication you can buy over the counter.

How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

If you have not had the coronavirus (Covid-19) vaccine, you may be at an increased risk of serious illness related to Covid-19 while you recover. Speak to your doctor or healthcare team if you would like to have the vaccine.

What complications can happen?

The healthcare team will try to reduce the risk of complications.

Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for you. Some risks are higher if you are older, obese, you are a smoker or have other health problems. These health problems include diabetes, heart disease or lung disease.

Some complications can be serious and can even cause death.

You should ask your doctor if there is anything you do not understand.

Your anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

General complications of any operation

- Bleeding during or after the operation. Usually there is little bleeding. If you continue to pass blood clots and blood in your urine, contact your GP.
- Infection which can spread to your blood stream and be life-threatening. If you need to pass urine often and pass only small amounts with a great deal of discomfort, you may have an infection. If your symptoms continue to get worse, contact your GP. You may need treatment with antibiotics.
- Allergic reaction to the equipment, materials or medication. The healthcare team is trained to detect and treat any reactions that might happen. Let your doctor know if you have any allergies or if you have reacted to any medication or tests in the past.
- Chest infection. If you have the operation within 6 weeks of catching Covid-19, your risk of a chest infection is increased (see the 'Covid-19' section for more information).

Specific complications of this operation

- Difficulty passing urine, if blood clots have moved up into your bladder, or if any pain is preventing you from emptying your bladder. You will need a catheter for a few days.
- A swollen penis, if the stricture was in the part of your urethra in your penis. This usually settles quickly.
- Narrowing of another part of your urethra caused by scar tissue forming. This is unusual.

Covid-19

A recent Covid-19 infection increases your risk of lung complications or death if you have an operation under general anaesthetic. This risk reduces the longer it is since the infection. After 7 weeks the risk is no higher than someone who has not had Covid-19. However, if you still have symptoms the risk remains high. The risk also depends on your age, overall health and the type of surgery you are having.

You must follow instructions to self-isolate and take a Covid-19 test before your operation. If you have had Covid-19 up to 7 weeks before the operation you should discuss the risks and benefits of delaying it with your surgeon.

Consequences of this procedure

- Pain is usually only mild and easily controlled with simple painkillers such as paracetamol.

How soon will I recover?

In hospital

After the operation you will be transferred to the recovery area and then to the ward.

You should be able to go home the same day or the day after. However, your doctor may recommend that you stay a little longer.

The area where the tissue was cut will be raw for a few days, so the first few times you pass urine you will feel a stinging pain. Drink plenty of water as this will keep your wound clean and reduce the risk of blood clots.

If you are worried about anything, in hospital or at home, contact the healthcare team. They should be able to reassure you or identify and treat any complications.

Returning to normal activities

If you had sedation or a general anaesthetic and you do go home the same day:

- a responsible adult should take you home in a car or taxi and stay with you for at least 24 hours;
- you should be near a telephone in case of an emergency;
- do not drive, operate machinery or do any potentially dangerous activities (this includes cooking) for at least 24 hours and not until you have fully recovered feeling, movement and co-ordination; and
- do not sign legal documents or drink alcohol for at least 24 hours.

If you continue to pass blood or find it difficult to pass urine, contact your GP. You may need to come back to hospital to have a blood clot removed using a catheter.

Even though there is no cut on the outside of your penis, you will have had an operation and it is normal to be tired for a few days. Do not do strenuous exercise during this time. You should be able to return to work after a few days.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

Do not drive until you can control your vehicle, including in an emergency, and always check your insurance policy and with the healthcare team.

Ask your healthcare team if you need to do a Covid-19 test when you get home.

The future

Sometimes a narrowing can happen again and symptoms will come back (risk: 3 to 5 in 10). Your surgeon will usually arrange for you to come back to the clinic for a check-up. They may need to show you how to use a catheter to help reduce the risk of a narrowing happening again.

Most men make a good recovery, with a large improvement in their symptoms. Progress is most rapid in the first 6 weeks but improvement can continue for many months, particularly if your bladder has become overactive.

Summary

A narrowing of your urethra can cause a slow flow of urine, often with dribbling, pain and infection. A urethrotomy should relieve your symptoms.

Surgery is usually safe and effective but complications can happen. You need to know about them to help you to make an informed decision about surgery. Knowing about them will also help to detect and treat any problems early.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgements

Reviewer: John Lemberger (FRCS)

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