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LETTER TO EDITOR (VIEWERS CHOICE)

SUCCESSFUL SURGICAL REPAIR OF SUB-CORONAL HYPOSPADIAS IN A 10-YEAR-OLD MALE: A CASE OF DELAYED PRESENTATION AND EFFECTIVE INTERVENTION

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In order to demonstrate the difficulties and positive results of surgical restoration in a delayed presenting situation, we offer a case of sub-coronal hypopadias in a male patient aged ten. One of the most prevalent congenital abnormalities affecting male genitalia is hypospadias, which is usually identified and surgically fixed in early childhood. However, in settings with limited resources, delayed diagnosis and treatment are frequently seen, which raises serious social, psychological and functional issues. In our instance, a tubularized incised plate (TIP) urethroplasty was performed on a male infant who had an aberrant urine stream and ventral curvature, with positive functional and cosmetic outcomes.

The urethral meatus's aberrant placement, which can vary from the glans to the perineum, is what defines hypopadias. Although the condition's occurrence is roughly 1 in 200 live male births, the way it manifests itself varies greatly depending on the location. Early diagnosis enables successful corrective surgery to be carried out in infancy in wealthy nations. However, delayed diagnoses are typical in nations like India where issues like poverty, illiteracy and restricted access to healthcare continue to exist. A later presentation in these situations, usually in childhood or even adulthood, may result in more issues.[1]

The subject of this study is a 10-year-old boy who has experienced urinating issues since he was a little toddler. His symptoms included spraying, an erratic urine stream and the need to crouch when urinating because of his penis' ventral curvature. Due to logistical and familial limitations, the illness was not treated during infancy despite these symptoms. By the time the youngster was ten years old, the illness had caused him considerable distress, particularly after he had been teased by classmates at school, which made his social anxiety much worse.

No other severe health issues were found, even though the patient had a history of cryptorchidism that required orchiopexy surgery at 17 months. A hooded prepuce and a sub-coronal meatus with a significant chordee were discovered during the patient's examination. His blood and urine tests were normal and ultrasonography confirmed the diagnosis of sub-coronal hypospadias without any concomitant abnormalities.

The TIP urethroplasty technique, which is known for its exceptional results in treating hypopadias, was used to plan the surgical intervention.[2] The urethral plate was mobilized, the chordee was corrected by dorsal plication and the plate was tubularized to create a new urethra. Glanuloplasty was performed and local skin flaps were used to cover the area. The patient was kept on postoperative monitoring for potential complications, such as bleeding, fistula formation, or infection and a urethral catheter was placed for seven days to promote healing.

The outcomes of the six-month follow-up were outstanding. The patient had a straight penis, a normal urine stream and a visually appealing outcome. There were no signs of stricture, chordee recurrence, or fistula. Preoperative counseling also addressed the psychological effects of the disease and after surgery, the patient's self-esteem significantly improved and he no longer experienced any social challenges associated with his condition.

This case illustrates several important aspects of hypospadias management. First, it highlights the issue of delayed presentation, which remains common in resource-limited regions. The impact on a child's emotional and social well-being can be significant, as was evident in this case. Second, it highlights how well the TIP urethroplasty technique - which has emerged as the gold standard for treating sub-coronal hypospadias- works, even in older kids.[3] In these situations, the method is the best option due to its ease of use, low rate of complications and superior functional and cosmetic results.[4] Lastly, the story emphasizes how critical it is to address the social and psychological difficulties that children with congenital conditions like hypopadias experience. A multidisciplinary approach, psychological assistance and preoperative counseling are essential for guaranteeing the patient's general wellbeing.

In conclusion, this case shows that surgical treatment of sub-coronal hypopadias can produce outstanding

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functional and cosmetic results, even if presentation is delayed. For older children, the TIP urethroplasty technique is still a dependable alternative. Effective therapy requires prompt intervention as well as consideration of the psychological aspects of the illness.[5]

Compliance with Ethical Standards

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Conflict of Interest : None

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