

Buccal Mucosa (Cheek) Graft

WARWIKI

Patient Information · The cheek graft used to rebuild your urethra or ureter

As part of your reconstructive surgery, your surgeon uses a small patch of the moist lining from the inside of your cheek — a buccal mucosa graft — to rebuild your urethra (or, less often, your ureter, the tube from a kidney to the bladder). This handout explains why the cheek is used, what happens, and how your mouth will feel and heal.

About This Graft

The inside of your cheek is lined with a tough, moist tissue that is an excellent match for the urinary tract. A thin oval patch is taken from one cheek (sometimes both, for a longer repair) and used to widen or rebuild the narrowed area. The graft is taken **while you are asleep, during the same operation** as your repair.

Why the inside of the cheek?

- It is hairless and used to a moist setting, like the urinary tract
- It is tough, heals quickly with little scarring, and resists infection
- It is taken during the same surgery — no extra cut on your body, and no visible scar

Is It Safe?

Yes. Taking a cheek graft is a well-established, well-tolerated part of urethral surgery, with very high patient satisfaction. Your surgeon stays clear of the duct that drains saliva and the corner of your mouth. Most effects involve the mouth — soreness, tightness, or numbness — and ease over the first couple of weeks. Taking graft from both cheeks causes more soreness, so it is used only when a longer repair needs it.

LEARN THE TERMS

Buccal mucosa

The moist lining on the inside of your cheek.

Graft

A patch of your own tissue moved to repair another area.

Urethra

The tube that carries urine out of the body.

Urethroplasty

Surgery to repair or rebuild the urethra; the cheek graft is part of it.

Donor site

The place the graft is taken from — here, the inside of your cheek.

General anesthesia

Medicine that keeps you asleep and pain-free during surgery.

Saliva (parotid) duct

A small opening inside the cheek that drains saliva; your surgeon avoids it.

Trismus

Temporary tightness or trouble opening the mouth wide; eases with gentle stretching.

WILL IT HURT? The graft is taken while you are asleep under general anesthesia, so you feel nothing during surgery. Afterward the cheek is sore — like a cheek bite or mouth ulcer — and may feel tight or numb. The soreness improves over the first 1–2 weeks, and the cheek keeps healing over the weeks after. Most people drink liquids within a day and a normal diet within a week.

How to Get Ready (Before Your Surgery)

- The graft is taken during your reconstructive surgery, **under general anesthesia** — follow all the usual surgery instructions (fasting, and which medicines to hold).
- **Care for your mouth** beforehand — brush and rinse well; your team may ask you to have a dental cleaning first.
- **Do not smoke, vape, or use tobacco** — it slows mouth and graft healing. Stopping before surgery helps a lot.

Tell your team ahead of time if you:

- Have had mouth, cheek, or jaw surgery, or radiation to the head or neck
- Have a mouth condition, or trouble opening your mouth wide
- Chew tobacco or betel nut, or have ongoing dental problems

What Happens During Surgery

- 1 You are asleep under general anesthesia for the whole operation, and your mouth is gently held open.
- 2 Your surgeon removes a thin oval patch of lining from one cheek (both cheeks for a longer repair), staying clear of the saliva duct and the corner of your mouth.
- 3 The graft is shaped and used to widen or rebuild the narrowed part of your urinary tract.
- 4 The cheek is usually left to heal on its own, or closed with dissolvable stitches.

After Surgery (Your Mouth)

- **Recovery is two-stage:** the soreness and tightness **improve over the first 1–2 weeks**, but the cheek keeps healing for about a month, and **numbness can take a month or more** to fully settle.
- Eat **soft, bland foods** at first; avoid spicy, acidic, very hot, or crunchy foods and alcohol. Rinse gently after eating.
- Gently **stretch your mouth open** each day to ease tightness. There is **no visible scar** — the graft is inside your mouth.

Call your care team or seek care if you have:

- A fever or chills
- Heavy or ongoing bleeding from the mouth
- Worsening mouth pain, swelling, or pus (infection)
- You cannot drink fluids or open your mouth at all

THREE THINGS TO REMEMBER

1. A small patch of the moist lining inside your cheek is used to rebuild your urethra — it is hairless, heals well, and leaves no visible scar.
2. It is taken while you are asleep during your urethral repair. To prepare, follow your surgery's fasting and medicine instructions, care for your mouth, and don't smoke.
3. Your cheek will be sore, tight, or numb — **this improves over 1–2 weeks but takes a month or more to fully heal.** Eat soft, bland foods, rinse gently, and stretch daily. Call for fever, heavy bleeding, or spreading swelling.