

Urethroplasty (Urethral Repair)

Patient Information · Surgery to repair a narrowing of the urethra

WARWIKI

Urethroplasty is surgery to repair a narrowed, scarred section of the urethra — the tube that carries urine out of your body. The narrowing (a stricture) slows or blocks your urine stream; urethroplasty opens it back up and is the most durable, long-lasting repair. This handout explains how it works, how to prepare, and what to expect.

About This Procedure

A **stricture** is a scarred, narrowed spot in the urethra that makes it hard to empty your bladder. Unlike simply stretching or cutting the narrowing (which often comes back), urethroplasty **rebuilds** the urethra to a normal width — the most reliable, lasting fix, with success around **85–95%**. How it is done depends on where the narrowing is and how long it is:

- The **incision** may be on the **penis**, in the area between the scrotum and anus (the **perineum**), or both — wherever the narrowing sits.
- A **short** narrowing can be **removed and the healthy ends sewn together**.
- A **longer** narrowing is **widened with a graft** — usually a patch from inside your cheek (this part has its own handout).

Your surgeon will tell you which approach fits your stricture.

Is It Safe?

Urethroplasty is a well-established, highly effective operation; most men have a lasting, open urethra afterward. Like any surgery it carries some risk — bleeding, infection, or the narrowing returning over time (usually re-treatable). Effects on erections or ejaculation are uncommon and usually temporary.

LEARN THE TERMS

Urethra

The tube that carries urine out of the body.

Stricture

A scarred, narrowed spot in the urethra that slows or blocks the urine stream.

Urethroplasty

Surgery to repair the narrowing and rebuild the urethra to a normal width.

Graft

A small patch of your own tissue (often from inside the cheek) used to widen the urethra.

Perineum

The area between the scrotum and the anus, where one common incision is made.

Catheter

A soft tube left in the urethra for about 1–4 weeks while the repair heals.

Urethrogram

An X-ray of the urethra, used to check that the repair has healed before the catheter is removed.

General anesthesia

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

WILL IT HURT? The surgery is done under general or spinal anesthesia, so you feel nothing during it. Afterward, expect soreness, swelling, and bruising around the incision (the penis and/or the perineum) for a couple of weeks — ice, a scrotal support, and pain medicine help. A catheter will be in place when you wake up. The surgery length depends on the repair, often 2–4 hours.

How to Get Ready (Before Surgery)

- Done under **general or spinal anesthesia** — follow all surgery instructions (fasting, and which medicines to hold, including blood thinners).
- A **urine test** checks for infection — an infection must be treated first.
- **Do not smoke** — it slows healing. If a cheek graft may be used, care for your mouth and a dental cleaning may be advised.
- Plan for a **catheter afterward (about 1–4 weeks)**, and arrange a ride home.

Tell your team ahead of time if you:

- Take a **blood thinner**, or have a current urine or skin infection
- Have had prior urethral surgery, radiation, or a skin condition like lichen sclerosus

What Happens During Surgery

- 1 You are asleep or numb from the waist down under anesthesia; antibiotics are given.
- 2 The surgeon makes an incision over the narrowing (penis, perineum, or both) and opens the scarred segment.
- 3 The narrowing is repaired — removed and the ends sewn together, or widened with a graft.
- 4 A **catheter** is placed to drain urine and protect the repair while it heals; the incisions are closed.

After Surgery

- You go home with a **catheter**, usually for **about 1–4 weeks**. Your team will show you how to care for it — do not pull on it.
- Swelling, bruising, and some **blood-tinged urine** around the catheter are normal early on.
- **Avoid heavy lifting, straining, cycling, and sex** for several weeks (often ~6) so the repair heals.
- Before the catheter comes out, you usually have an **X-ray of the urethra** to confirm the repair has healed.

Call your care team or seek care if you have:

- The catheter **falls out, blocks, or stops draining**
- A fever or chills, or growing redness, pain, or drainage at an incision
- Heavy bleeding, or you **cannot urinate** after the catheter is removed

THREE THINGS TO REMEMBER

1. Urethroplasty rebuilds a narrowed urethra and is the most durable repair. The incision may be on the penis, in the perineum, or both, and a graft (often from the cheek) may be used — your surgeon will explain your repair.
2. To prepare: follow your fasting and medicine instructions, treat any infection first, don't smoke, and plan for a catheter afterward (about 1–4 weeks).
3. Keep the catheter in until your team removes it (usually after a healing X-ray), and avoid heavy lifting, straining, and sex for several weeks. Call right away if the catheter stops draining, you get a fever, or you cannot urinate after it is out.