

Male Urethral stricture management: Trends in Australia over last 22 years

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INTRODUCTION

- Urethral stricture disease in males is an increasingly common problem, especially within an ageing population.
- There is significant variability in the management of stricture disease with options including urethral dilatation, urethrotomy, urethrostomy and urethroplasty.

AIM

This study was conducted to evaluate the prevalence of male urethral stricture disease and the trends of management over the last two decades in Australia.

MATERIAL & METHODS

The Medicare Australia database was used to assess the item numbers claimed for urethral stricture management, from January 1994 to December 2016.

Item numbers analysed included;

- 37300 – passage of sounds,
- 37303 – urethral stricture dilatation,
- 37327 – urethrotomy,
- 37324 – urethrostomy,
- 37342 – single stage urethroplasty,
- 37345 – first stage urethroplasty,
- 37348 – second stage urethroplasty, and
- 37351 – other urethroplasty.

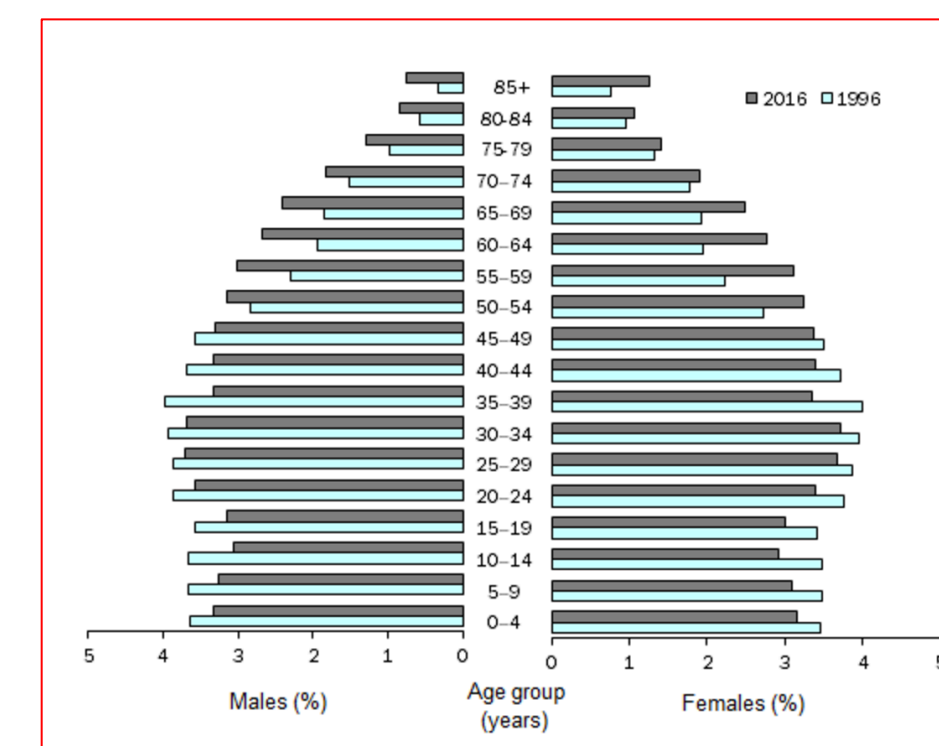
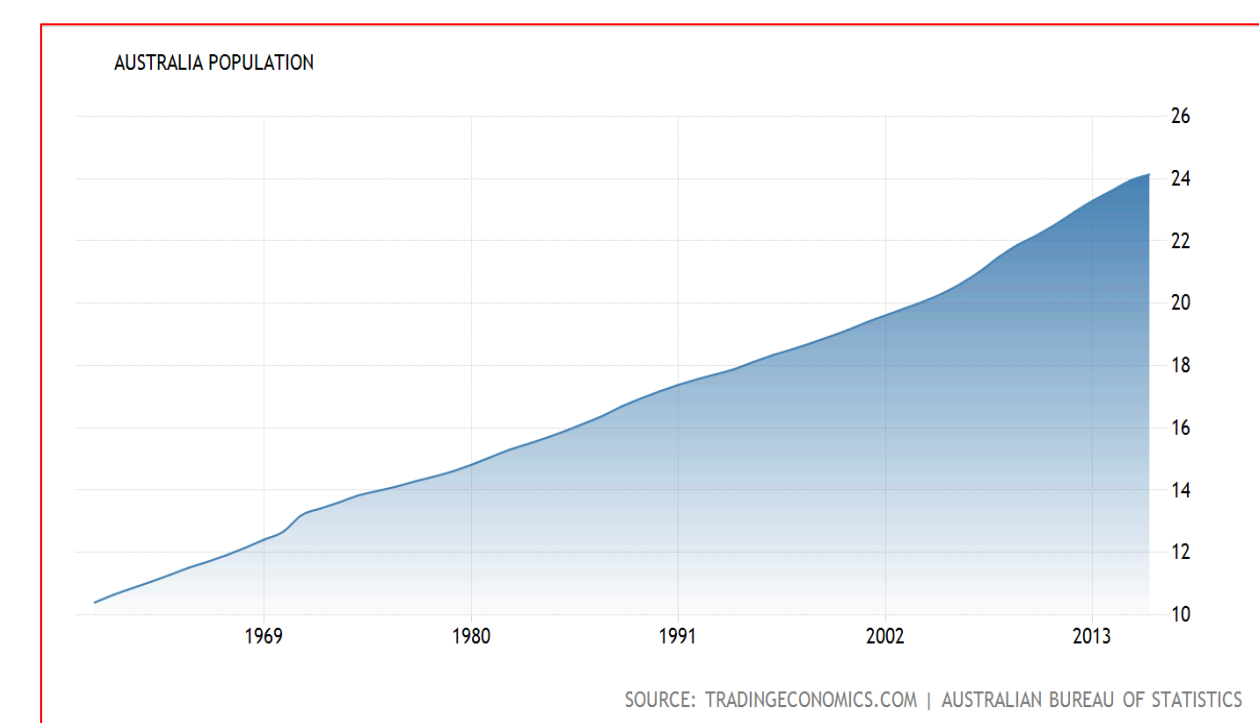
A survey was also conducted amongst Australian urological surgeons, to evaluate – if they performed urethral reconstruction, type of training received, number/type of cases performed per year and area of practice.

RESULTS

Type of procedure	Episodes of care
Passage of sounds	19,618
Urethral stricture dilatation	69,390
Internal urethrotomy	46,085
Urethrostomy	5447
Single stage urethroplasty	3732
1 st stage urethroplasty	389
2 nd stage urethroplasty	282
Other urethroplasty	733
Ratio of endoscopic episodes to urethroplasty	13.12

During this time, the Australian population increased from 18 to 24 million.

Exact prevalence of urethral stricture disease is unknown.



- Of 489 current urological surgeons in Australia, 17 reported performing urethral reconstruction surgery.
- 14 surgeons operated on only adults, 1 on adults and children and 2 only on children.
- Only half of them underwent formal fellowship training in urethral reconstruction.
- Most performed less than 50 cases per year and worked in metropolitan areas.

SUMMARY / CONCLUSION

- This is the largest set of data on urethral stricture disease management in Australia.
- Due to the growing population and improved survival there is a likely increasing incidence of urethral stricture disease.
- Few patients undergo definitive reconstruction, with the majority living in metropolitan areas.
- Hence, there is a great need for urethral reconstructive urologists in Australia to provide better definitive surgery options in the appropriate patient group, rather than repeated endoscopic procedures, particularly in non-metropolitan centres.

ACKNOWLEDGEMENTS

We acknowledge the assistance of the Medicare Australia Database to achieve the setup and results of this study.

REFERENCES

1. abs.gov.au - Australian Bureau of Statistics
2. www.mbson.jine.gov.au - Australian Medicare Benefits schedule

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