

Patient information

Preputioplasty

Urology Department

Your doctor has advised you to have a preputioplasty. This leaflet explains what to expect when you have a preputioplasty.

What is a preputioplasty?

Cutting of the band in the foreskin. The cut is then sewn up in the other direction to make the band longer.

Why would I be having this done?

You will have been recommended a preputioplasty because the foreskin forms a tight band when it is retracted. This is often worse when the penis is erect. This may be giving you problems with splitting and bleeding making sexual intercourse painful.

What are the benefits of this procedure?

The band in the foreskin is made longer so it is not tight when the foreskin is pulled back.

What are the risks of having a preputioplasty?

The most common complication of preputioplasty is bleeding of the wound. All wounds will bleed a small amount. Some wounds will bleed profusely and a small number of people will need to go back to theatre for a further procedure.

If you do develop bleeding when you get home press on the area with a clean tissue continuously for ten minutes. If it still does not stop go to the Emergency Department (A&E Dept.) of your nearest hospital.

The wound may become infected which may require treatment with antibiotics.

Dissolvable sutures (stitches) are used during the procedure. If these are still present after the wound has healed, after three or four weeks, they can be removed by the practice nurse at the GP surgery.

Your penis will look different after the procedure. You may not be completely cosmetically satisfied.

Some nerve damage can occur, leading to decrease in sensation.

There will be some discomfort in the wound after the operation. Rarely, the scar may remain painful in the long term.

If a preputioplasty fails to improve your symptoms it may be necessary to do a circumcision in the future.

Are there any alternative treatments available?

Circumcision is the alternative to this procedure.

What will happen if I decide not to have treatment?

The foreskin may remain as it is currently or the problem may get worse leading to increasing discomfort or problems with retraction.

What anaesthetic will I be given?

You may be given general anaesthetic, or local anaesthetic. General anaesthesia is drug-induced unconsciousness. It is always provided by an anaesthetist, who is a doctor with specialist training. Local anaesthesia is drug-induced numbness: it may be provided by an anaesthetist, surgeon or other healthcare professional, depending on the technique used.

Unfortunately, both local and general anaesthesia can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain. Complications are very rare, but can cause lasting injury: they include awareness, paralysis and death.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

You will be given an opportunity to discuss anaesthetic options and risks before your surgery.

For more information, please ask for a copy of the leaflet “**You and Your Anaesthetic**” (PIF 344).

How do I prepare for the procedure?

- Preputioplasty is normally carried out as a day case procedure.
- A short time before your procedure you will be asked to attend the preoperative assessment clinic where you will be seen by a specialist nurse who will assess your general health and book any investigations you may need before attending theatre. These can include blood samples, urine samples, a chest X-ray or an ECG (heart tracing).
- You will be given instructions regarding fasting prior to the procedure.
- Normal medication should be taken unless instructed otherwise.
- You should make sure you have some painkillers at home before you come to hospital.

- If you are taking any tablets to thin the blood such as Warfarin, Aspirin or Clopidogrel it is important that you let the doctor or nurse know because they may need to be stopped for several days before the operation can be done.

What does the operation involve?

The operation involves the cutting the band in the foreskin which is tight. The cut is then sewn up in the other direction to make the band longer. Dissolving sutures (stitches) are inserted into the wound.

What should I expect after my operation?

- After your operation has finished, you will stay up in theatre in the recovery suite until you are fully recovered from the anaesthetic, and the anaesthetist is happy for you to return to the ward.
- The nursing staff will ask you at intervals whether you have passed urine. This is quite a normal question after any operation.
- A nurse will check your pulse, blood pressure, breathing and wound regularly. It is important that if you feel any pain you must tell the nursing staff, who can give you painkillers to help.

If you have had a General Anaesthetic

The nursing staff will also advise you when you can start taking sips of water. Anaesthetics can make some people sick. If you feel sick we advise you not to drink until this feeling has passed. The nursing staff can offer you an injection to help this sick feeling go away.

Going Home

If you have had a General Anaesthetic:

- You must have had something to eat and drink.
- You must have passed urine.
- The nursing staff must be satisfied with your wound.
- You must have someone to take you home.
- You should not be left alone overnight.

You must not drive, ride any vehicle, operate machinery, climb ladders, drink alcohol or sign important documents for 24 hours.

If you have had a Local Anaesthetic:

- You must have had something to eat and drink.
- You must have passed urine.
- The nursing staff must be satisfied with your wound.

What can I expect after the operation?

- Swelling of the tip of the penis may occur for a few days after surgery. Pain can be relieved with paracetamol and wearing supportive underpants may relieve some discomfort, (we can supply scrotal supports).
- Sterile Vaseline is often applied at the end of the operation as a dressing.
- You can take a short shower from the evening after the operation. You can take a bath from 48 hours after the operation. You should not use any soap or other toiletries just warm water. You can add salt to the bath if you wish.
- Do not apply any creams, talcum powder or medication to the wound as they may trap bacteria and could cause infection.
- The stitches are self-dissolving and do not have to be removed. If they persist for more than three weeks and the wound is healed you can ask your practice nurse to remove them.
- Sexual intercourse should be avoided until the scar is completely healed as an erection can cause discomfort and cause the stitches to fall out.

After discharge

- An outpatient's appointment is not required but if you have any problems you are advised to contact your family doctor (G.P.) or the Accident and Emergency Department.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

For general queries about circumcisions telephone the Urology Centre on Tel: 0151 282 6809

Text phone number: 18001 0151 282 6809

For clinical questions specific to your case, telephone the secretary of your Urology Consultant

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