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elstituto Clinico Humanitas IRCCS, Clinical and Research Ho View additional affiliations ~	spital, Rozzano, Italy		Makalenin aldığı atıf sayısını belirtir.
Abstract Purpose: We investigated whether tissue engineered materia multicenter study in patients with recurrent strictures, exclude the patient cheek and sent to the laboratory to manufacture t techniques were used, including ventral onlay, dorsal onlay, of evaluation, uroflowmetry and post-void residual urine measu the urethrography was repeated. Patients who underwent fur years who were included in study the strictures were penile in Treatment succeeded in 32 of the 38 patients (84.2%) and fai	may be adopted using standard techniques for anterior urethroplasty. Ma ing those with failed hypospadias, lichen sclerosus, traumatic and posterior s he graft. After 3 weeks the tissue engineered oral mucosal MukoCell® graft w lorsal inlay and a combined technique. Cystourethrography was performed 1 rement every 6 months. When the patient showed obstructive symptoms, dei ther treatment for recurrent stricture were classified as having treatment failu 1 3 (7.9%), bulbar in 29 (76.3%) and penobulbar in 6 (15.8%). Median stricture ed in 15.8%. Success was achieved in 85.7% of ventral onlay, 83.3% of dorsal	View references (28) terials and Methods: We performed a retrospective trictures. A 0.5 cm ² oral mucosa biopsy was taken from ras sent to the hospital for urethroplasty. Four month postoperatively. Patients underwent clinical fined as maximum urine flow less than 12 ml per second, are. Results: Of the 38 patients with a median age of 57 a length was 5 cm and median followup was 55 months. onlay, 80% of dorsal inlay and 100% of combined	This Month in Adult Urology Smith, J.A. (2018) Journal of Urology View details of this citation Inform me when this document is cited in Scopus: Set citation alert > Set citation feed >
technique cases. No local or systemic adverse reactions due t using the same techniques suggested for anterior urethropla Research, Inc.	o the engineered material were noted. Conclusions: Our findings show that sty and native oral mucosa, and guaranteeing a similar success rate. © 2018.	a tissue engineered oral mucosa graft can be implanted American Urological Association Education and	Related documents Reconstructive Management with Buccal Urethroplasty Barbagli G. Montorsi E. Sansalone S.
Author keywords (male) (mouth mucosa) (outcome and process assessment (healt	h care) (tissue engineering) (urethral stricture) (urologic surgical procedures)	akalenin	 (2016) European Urology, Supplements Re: Guido Barbagli, Massimo Lazzeri. Clinical experience with urethral reconstruction using tissue-engineered ora mucosa: A quiet revolution. Eur Urol. in press. http://dx.doi.org/10.1016/j.eururo.2015.05.043

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