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Human Umbilical Cord Allograft Associated with Higher Rates of Successful Urethrocutaneous Fistula (UCF) Repair among Pediatric Patients

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- UCF known complication following hypospadias repair
- Refistulization can occur following UCF repair
- Extracellular matrices examined as a method to reduce rates of refistulization – AmnioCord

Does AmnioCord use during UCF repair reduce rates of refistulization?

- Retrospective analysis of 89 UCF repairs & post-op outcomes from 2016-2018, using GEE models

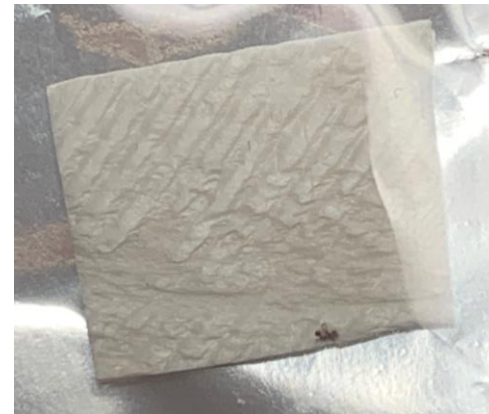


Figure 1. A portion of AmnioCord - a thick membrane derived from umbilical cord used to promote wound-healing

- AmnioCord use associated with significantly reduced rates of refistulization, compared to standard of care (SOC) ($p=0.02$)
 - AmnioCord: 72.2% UCFs successfully repaired
 - SOC: 49.1% UCFs successfully repaired
- After controlling for patient age and number of prior UCF repairs, AmnioCord use associated with 2.9x greater odds of surgical success vs. SOC (95% CI: 1.2-6.9; $p=0.02$)
- AmnioCord use may be associated with improved wound-healing following UCF repair, and should be further examined

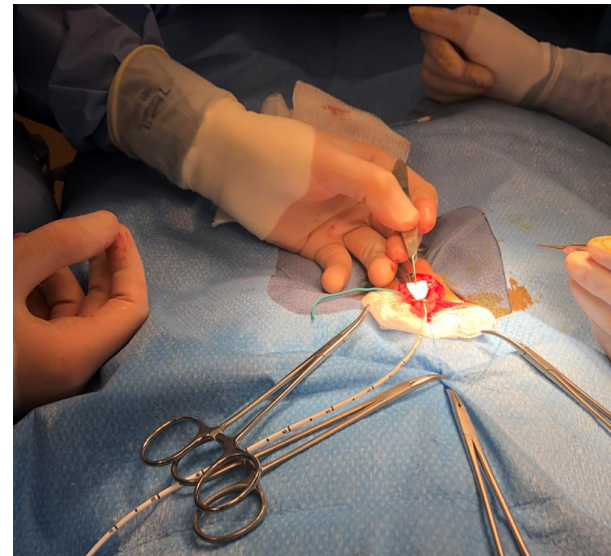


Figure 2. UCF repair using AmnioCord