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## **Obituary**

## Obituary for Sava Perovic: Pioneer of Reconstructive Surgery of the Male Genitalia. Born in Yugoslavia on February 21, 1947, he Died in Belgrade on April 4, 2010, at the Age of 63

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The reconstructive urological world probably should have suspected that it had the makings of a giant on its hands when Sava Perovic started to reconstruct diseased male genitalia in the early 1980s. Several techniques that Sava pioneered would soon become part of the urological armamentarium. He performed longitudinal dorsal skin flap for urethroplasty in hypospadias repair, introduced penile widening using tissue engineering, and investigated the use of corporal grafting in epispadias repair. Perovic was dedicated to improving repair related to Peyronie's disease, and he established the detrusor tunneling technique now used for ureteral reimplantation as well as the complete penile disassembly technique used in hypospadias reconstruction of the male genitalia.

The child of Vasilije and Jelena Perovic, Sava attended college and medical school in Belgrade, where he trained as a surgeon. He began his professional career at the University Children's Hospital in Belgrade and soon became chief of its urological department. One of his first accomplishments was establishing and developing the practice of pediatric urology in his country. Over time, he came to be known as a gifted surgeon, and his success was recognized by physicians and patients worldwide. He was eventually honored with Serbia's Presidential Medal of Freedom and membership in the Serbian Academy of Sciences and Art.

Despite Perovic's success, he remained approachable. Everyone who met him—whether celebrities, politicians, members of the royalty, military veterans, or patients in his daily medical practice—found him ready to listen to their personal story. Moreover, they found him ready to offer his surgical skills to manage diseased male genitalia, improving the quality of life of countless patients and their families.

The beauty of Perovic's work was that he understood the complexity of diseased male genitalia and worked with his patients compassionately to find the best solution—one that balanced the patient's expectations and the objective

outcome. In his later years, he dedicated himself to managing the epidemic of failed hypospadias repair, convinced that surgery in the adult population required both surgical skill and years of experience in the field. Up until his death, he was working with his assistant and friend Rados Djinovic, diligently treating failed hypospadias repair.

Hypospadias is a common congenital anomaly that occurs in approximately 1 in 250 live male births in the United States and 3 in 1,000 live births in European countries. Its prevalence has increased since the 1970s. Perovic knew well that unsuccessful repair of primary hypospadias can result in severe postoperative complications involving the urethra, such as meatal or penile stricture, fistula, diverticulum, retrusive meatus, and/or corpora cavernosa, such as residual penile curvature or torsion associated with loss of the preputial hood, significant scarring, and ventral skin deficiency. Complications can result in defects in a single compartment of the male genitalia (ie, urethra, corpora cavernosa, glans, or penile and scrotal skin) or a combination of compartments.

Perovic knew very well that in the past few decades, attitudes toward sexuality and the psychological and emotional value of the sexual organs have been changing. For this reason, he dedicated the last months of his life to improving repair of genetalia. Normal penile anatomy has been shown to contribute positively to a patient's self-esteem, body image, confidence, and sexuality; knowing this, Perovic was always open to the wishes and feelings of male patients who wanted to achieve optimal penile function and optimal aesthetic appearance of their genitalia.

Perovic taught us that a multicompartment reconstructive approach to diseased male genitalia represents the ideal anatomical and functional pathway to the future. He also taught us that penile reconstruction should be spread

over one or more compartments (ie, urethra, corpora cavernosa, glans, penile and scrotal skin) and should allow the penile anatomy and function to remain as close as possible to normal penile appearance, erectile axis, penile length, and physiological functioning. He also felt that we

should do our best to reduce the personal and social cost of other surgeries.

Perovic is survived by his wife Jolanta, his daughters Jovana and Ivana, and his grandchild Tara. He will be missed by his colleagues, friends, and family around the world.