

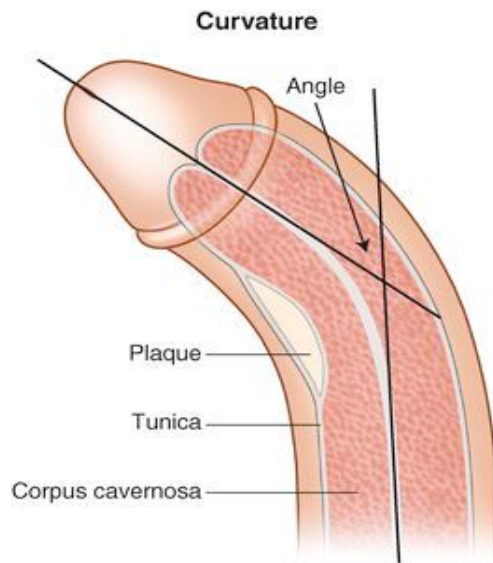
# Penile straightening (Corporoplasty)

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# The bent penis - some general considerations



Choice of treatment depends on

1. penile length
2. degree of angulation
3. other deformities
4. quality of erections

Size and shape of the penis varies greatly between individual men. A curved or bent penis can either be a congenital abnormality (then you are born with it) – or it can be acquired at a later stage in life. The most common cause of acquired penile curvature is Peyronie's disease, a condition where plaques inside the penile shaft prevent full penile extension in length and girth during erection.

When treating penile curvature there are a couple of key points that need to be emphasized:

If the penile bent is only mild and does not cause any difficulties with sex, then it is best left alone.

If your erections are good, the type of operation you need depends on the degree of curvature:

Plication is best suited to bends of less than

60degrees; it has less impact on erectile function and sensation, but it will shorten your penis.

Plaque incision and grafting is best suited to bends of more than 60 degrees or complex deformities; it has more impact on erection and sensation, but produces less shortening.

The aim of any procedure is to get a functionally straight penis (with less than 20 degree curvature)

No penile straightening procedure can return your penis to its normal, pre-curvature state. Your penis will not be exactly the same as it was before the curvature developed. Equally no surgical procedure will lengthen your penis.

## Plications procedure (modified Nesbit's operation)

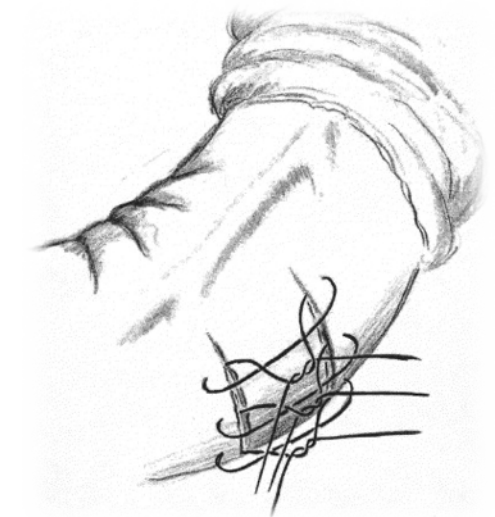
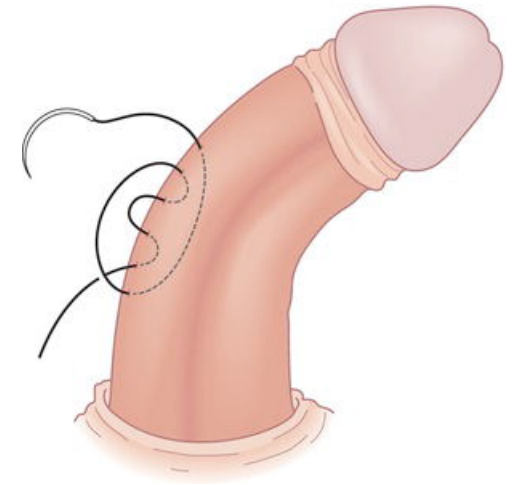
Plication is normally used in patients with reasonable erectile function and curvatures of less than 60 degrees.

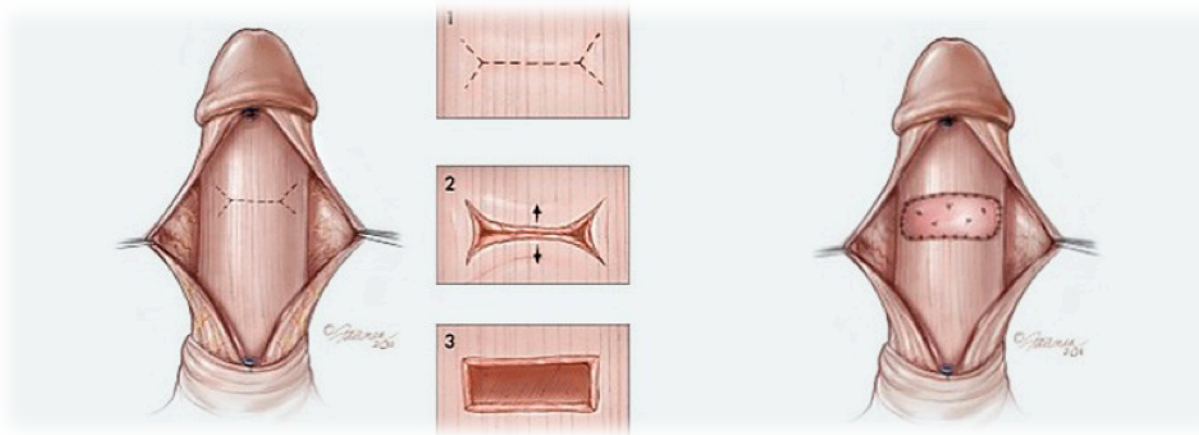
You will be treated under general anaesthetic with additional local anaesthetic nerve block of the penis for postoperative pain relief. While you are under anaesthetic we will induce an artificial erections with medication to measure and document the deformity of your penis.

The incision will be made just behind the head of your penis, - the skin will be rolled back (de-gloving).

Strong plication sutures will be placed on the longer side of the penile shaft. When tied, these stitches bunch up the erectile tissue and straighten the penis. You may be able to feel these sutures under the skin of your penis during the first few months after the surgery.

The procedure will be carried out as day case surgery. Recovery is usually short (1-2 weeks) but you will need to refrain from any sexual activity – particularly penetrative intercourse – for three months.





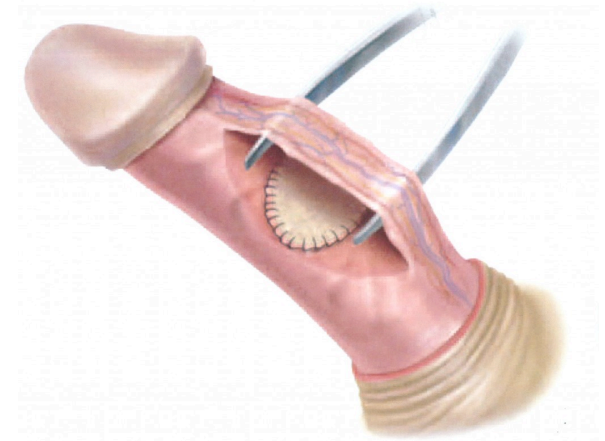
## Plaque incision and grafting (LUE procedure)

Plaque incision and grafting involves cutting into the plaque to release the scarred area and using a graft patch to fill the gap.

The incision is placed around the circumference just behind the head of your penis. The skin will be rolled back and we induce an artificial erection with drugs injected into your penis.

To incise the plaques we will need to dissect and lift-off the blood vessels and nerves on top of your penis (for upward bends) or your urethra (water passage) for downward bends.

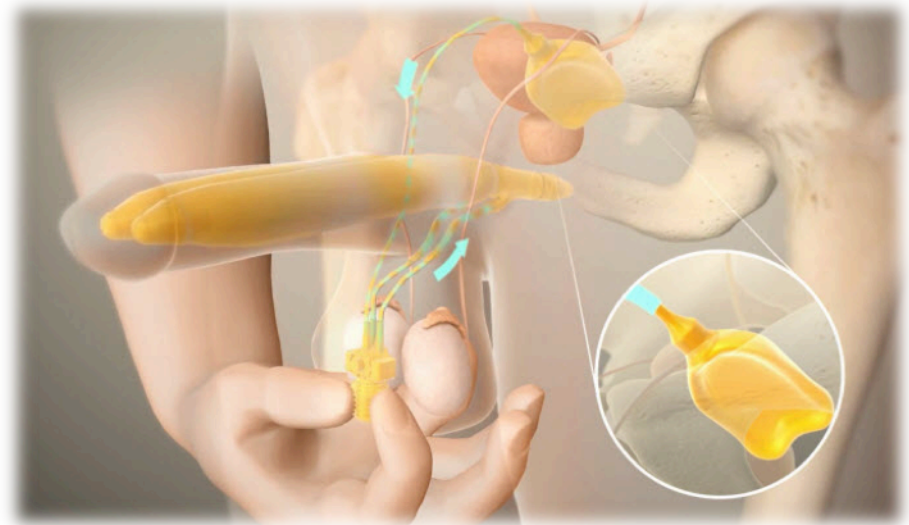
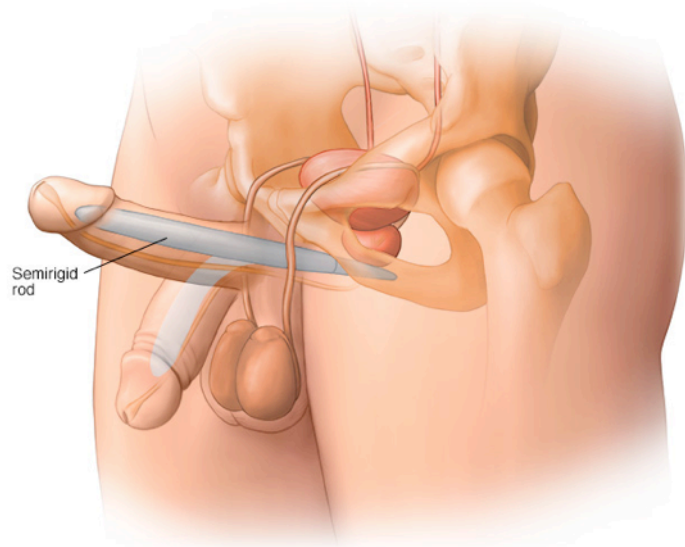
Once stretched into straight position, the incision will turn into a rectangular defect that will need to be closed in watertight fashion with graft material. The graft material is pre-packaged and we currently use a bovine pericardial patch for the repair.



Once grafting has been completed nerves, blood or urethra will be placed into their normal position and the wound will be closed with dissolvable stitches.

If your foreskin appears tight or you have had previous surgery, we usually recommend a circumcision at the same time.

The procedure is usually done as day case surgery but recovery will take longer (3-4 weeks). In the first three months after surgery you will be encouraged to carry out rehabilitation exercises.



## Penile implant surgery

In men where penile curvature is associated with severe erectile dysfunction (unresponsive to conventional treatment with tablets or drugs) it may be necessary to use a penile implant to address both problems.

The insertion of a penile prosthesis will not only straighten the penis but it will also restore the ability to achieve and maintain an erection whenever the mood strikes.

The penile prosthesis comes either as a semirigid or as an inflatable implant consisting of several components, which are all hidden inside the body.

Please refer to the information leaflet on penile implant surgery to receive more information on this type of treatment.

Implant surgery will be carried out either as day case surgery or with a short overnight stay in hospital. Recovery will take between 2-3 weeks. During the first six weeks you will not be able to use the implant.

The procedure will need to be regarded as "end-stage" irreversible surgery. It is important to make sure that all alternative treatments have been exhausted before option for penile implant surgery.





## What are the alternatives?

### No treatment

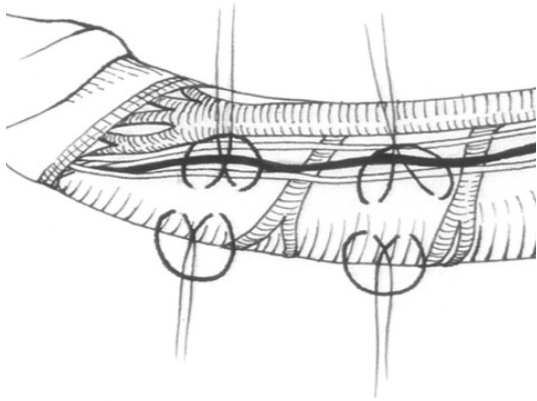
If the degree of curvature is mild and does not affect the ability to penetrate, surgery is not needed. If the main complaint is poor erectile function, then oral medication (e.g. Viagra, Levitra, Cialis) may be all that is required.

Vacuum erection or traction devices

Regular use of these devices may produce some penile straightening, together with some penile lengthening.

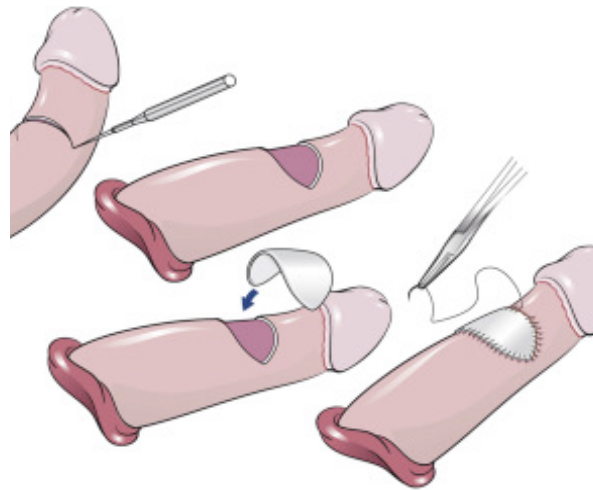
### Collagenase injections

The injection of collagenase dissolves or disrupts the plaque and may allow some straightening without shortening. On average, the curvature correction is about 18 degrees. The treatment is currently not yet widely available on the NHS.



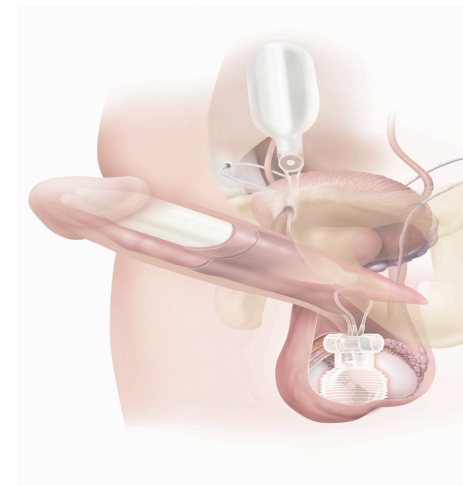
### Plication procedure

- Shortening of penis (about 1cm for every 15degree curvature that is corrected)
- Residual curvature (<20 degrees)
- Temporary swelling and bruising of penis and scrotum
- Circumcision required in 25% of cases
- Erectile dysfunction (5%)
- Nerve injury with temporary or permanent numbness of penis (5%)
- Recurrence of curvature (2-10%)
- Dissatisfaction with cosmetic result (2-10%)
- Bleeding or infection (2-10%)



### Incision and Grafting

- Residual curvature (<20 degrees)
- Temporary swelling and bruising of penis and scrotum
- Circumcision required in 25% of cases
- Erectile dysfunction (25%)
- Nerve injury with temporary or permanent numbness of penis (25%)
- Shortening of penis (20%)
- Dissatisfaction with cosmetic or functional result (2-10%)
- Recurrence of curvature at later stage (2-10%)



### Penile implant

- Bruising and swelling
- Infection of device (1-2%)
- Floppiness or "drooping" of glans (head of penis) (2-10%)
- Device erosion requiring revision surgery at later stage (<5%)
- Malfunction or mechanical failure of inflatable implants within 10 years (<5%)
- Inadvertent injury to bladder, bowel, blood vessels or penis (<2%)

## Complications



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