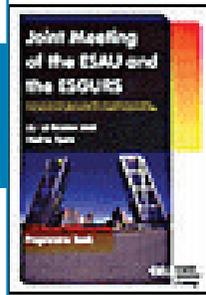


Management of penile shortening after Peyronie's disease surgery

European Society of Andrological Urology (ESAU) and European Society for Genito-Urinary Reconstructive Surgeons (ESGURS) are full members of the EAU Section Office. Thursday, 25 October 2007. Dr Moncada, Madrid (ES).
10th Congress of the European Society for Sexual Medicine (ESSM). Dr. Moncada, 25 - 28 November, 2007. Lisboa Congress Center, Lisbon, Portugal.



1. Introduction and Objective:

Loss of penile length is a common complaint of patients undergoing surgical correction of penile curvature for Peyronie's (PD) disease. Penile extenders have been developed to increase penile length by regular application on the penis based on their tissue expansion properties.

We assessed the value, in terms of increasing penile length, of the application of a penile extender (**Andropenis**[®]) in men who have undergone tunica albuginea plication or grafting for PD.

We have also studied the impact of this treatment on the health related quality of life (HRQoL).

2. Methods:

40 men, aged between 54-64 (mean 58 y.o.), undergoing PD surgery constituted the study population; 12 patients were submitted to a grafting procedure while the rest (n=28) underwent a plication technique. 20 consecutive patients were treated with a penile extender device (**Andropenis**[®]) while the previous 20 served as a control group.

The extender was applied when the circumcision had healed (2 to 3 weeks after surgery) with a traction force of 900 to 1200 gr 8 to 12 hours daily during at least 4 months.

Parameters studied were penile length before, after surgery and after the continued use of the device. HEQoL using the SF-36 questionnaire was also assessed to compare both groups of patients.

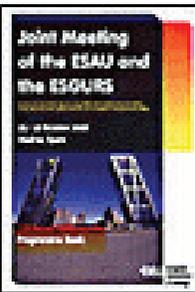
3. Results:

Penile shortening after surgery ranged from 0.5 cm to 4 cm. Shortening was slightly less relevant in patients undergoing a grafting procedure but this difference was not statistically significant.

Treatment with the device produced a length increase ranging from 1 to 3 cm, this increase was proportional to the number of hours per month the patient was using the extender.

There were significant differences in several of the SF-36 parameters in the patients under the device when compared to those not using the extender ($p < 0.001$).

Four patients had to reduce the time of application of the extender because of moderate pain in the circumcision wound; no other side effects were reported.



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4. Conclusions:

Our study suggests that the use of a continuous penile stretching device (**Andropenis**[®]) is an effective and safe approach to maximize penile length in patients undergoing PD surgery.

Its use produces an improvement in QoL parameters when compared to a control group.

