

## Management of penile shortening after Peyronie's disease surgery

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### 1. Objective:

The aim of the study was to evaluate the effects of a daily application of a penile extender device over 8–12 hours, in order to increase the length of the penis in patients who had undergone penile surgery for Peyronie's disease. A secondary aim was to determine the health related quality of life (HRQOL) outcome in patients using this device.

### 2. Design and methods:

30 men aged 54–64 years (mean age 58) underwent penile surgery for PD. The surgical technique applied in eight of the patients was the incision of the fibrous plaque and grafting, while the others underwent plication of the albuginea (Essed technique). After the surgery, 15 of the 30 patients were treated with a penis extender (**Andropenis**) daily, over a 4-month period.

Length and girth of the penis were measured before and after surgery as well as after the use of the extender. HRQOL was also determined using the SF-36 survey to compare both groups of patients.

### 3. Results:

Sustained treatment over a period of 4 months with the penile stretching device provided an increase in length of 1 to 4 cms and an increase in girth of 0,5 to 1,5 cm. Comparing the results of the SF-36 survey, a significant difference could be observed between both groups ( $p < 0.001$ ).

The use of the device was generally well tolerated, only 2 patients had moderate penile pain. No further complications were recorded.

### 4. Conclusion:

The use of a penile extender device over 8 to 12 hours daily is an effective and safe way to minimize loss of penile length in patients operated for PD. Its use provides a significant improvement in HRQOL outcomes compared to the control group.

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**ABSTRACT**  
 Peyronie's disease (PD) is a fibrotic condition of the penile tunica albuginea that causes penile shortening and curvature. The aim of this study was to evaluate the effects of a daily application of a penile extender device over 8–12 hours, in order to increase the length of the penis in patients who had undergone penile surgery for PD. The surgical technique applied in eight of the patients was the incision of the fibrous plaque and grafting, while the others underwent plication of the albuginea (Essed technique). After the surgery, 15 of the 30 patients were treated with a penis extender (Andropenis) daily, over a 4-month period. Length and girth of the penis were measured before and after surgery as well as after the use of the extender. HRQOL was also determined using the SF-36 survey to compare both groups of patients. Sustained treatment over a period of 4 months with the penile stretching device provided an increase in length of 1 to 4 cms and an increase in girth of 0,5 to 1,5 cm. Comparing the results of the SF-36 survey, a significant difference could be observed between both groups (p < 0.001). The use of the device was generally well tolerated, only 2 patients had moderate penile pain. No other complications were recorded.

**RESULTS**  
 Sustained treatment over a period of 4 months with the penile stretching device provided an increase in length of 1 to 4 cms and an increase in girth of 0,5 to 1,5 cm. Comparing the results of the SF-36 survey, a significant difference could be observed between the groups of patients who did not use the device and those who used it (p < 0.001). The use of the device was generally well tolerated, only 2 patients had moderate penile pain. No other complications were recorded.

**CONCLUSIONS**  
 The use of a penile extender device over 8 to 12 hours daily is an effective and safe way to minimize loss of penile length in patients operated for PD. Its use provides a significant improvement in HRQOL outcomes compared to the control group.

**INTRODUCTION**  
 Curved shortening is one of the commonest complications of Peyronie's disease (PD).

**OBJECTIVES**  
 To assess the effect of a penile extender device on penile length and girth in patients who had undergone penile surgery for PD. To assess the effect of the device on the health related quality of life (HRQOL) of these patients.

**MATERIALS & METHODS**  
 30 men aged 54–64 years (mean 58), underwent penile surgery for PD. Eight patients were treated with the incision and grafting of the fibrous plaque and the others with the plication of the albuginea (Essed technique). After the surgery, 15 of the 30 patients were treated with a penis extender (Andropenis) daily, over a 4-month period. Length and girth of the penis were measured before and after surgery as well as after the use of the extender. HRQOL was also determined using the SF-36 survey to compare both groups of patients.

**RESULTS**  
 Sustained treatment over a period of 4 months with the penile stretching device provided an increase in length of 1 to 4 cms and an increase in girth of 0,5 to 1,5 cm. Comparing the results of the SF-36 survey, a significant difference could be observed between both groups (p < 0.001). The use of the device was generally well tolerated, only 2 patients had moderate penile pain. No other complications were recorded.

**CONCLUSIONS**  
 The use of a penile extender device over 8 to 12 hours daily is an effective and safe way to minimize loss of penile length in patients operated for PD. Its use provides a significant improvement in HRQOL outcomes compared to the control group.

**Figures and Tables:**  
 - Undergown extender device (Image)  
 - Way of using the device (Image)  
 - Before and after (Essed) plication showing shortening of Bergada (Image)  
 - Patient with the device (Image)  
 - Bar chart: Mean Score of SF-36 by Dimensions (p < 0.001) comparing 'Penis extender' and 'Control' groups across various dimensions.  
 - Bar chart: Results of penile length and girth (p < 0.001) comparing 'Penis extender' and 'Control' groups.