

Management of penile shortening after Peyronie's disease surgery



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OBJECTIVE:

To assess the value, in terms of increasing the length of the penis, of 8 to 12-hour daily application of a penile extender device after penile surgery for Peyronie's disease (PD). A secondary objective was to assess the health related quality of life (HRQOL) outcome in patients using this device.

DESIGN AND METHODS:

30 men, ages 54-64 years (mean: 58), underwent penile surgery for PD. In eight patients the surgical technique was incision of the fibrous plaque and grafting, while the rest 22 underwent plication of the albuginea (Essed technique) 15 of the 30 patients were treated with a penile extender (Andro-penis device) daily over a 4-month period. Length and girth of the penis was measured before and after surgery and after the use of the extender. HRQOL was also determined using the SF-36 survey to compare both groups of patients.

RESULTS:

Sustained treatment for 4 months with the penile stretching device provided an increase from 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.

CONCLUSION:

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

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ABSTRACT

Objectives: To assess the value, in terms of increasing the length of the penis, of 8 to 12-hour daily application of a penile extender device after penile surgery for Peyronie's disease (PD). A secondary objective was to assess the health-related quality of life (HRQOL) outcome in patients using this device.

Methods: 20 men, ages 54–64 years (mean 58), underwent penile surgery for PD. In eight patients, an incision of the fibrous plaque and grafting was performed, while the rest (12) underwent excision of the plaque (Essex technique). 14 of the 20 patients were treated with a penile extender (Andro-penis device) daily (8 to 12 hours of continuous stretching ranging from 300 to 1200 gr.) over a 4-month period. Length and girth of the penis were measured before and after surgery and subsequently after the use of the penile extender. HRQOL was also determined using the SF-36 survey to compare both groups of patients.

Results: Penis shortening ranged from 0.5 to 4 cm after surgery for PD. Sustained treatment for 4 months with the penile stretching device provided an increase from 1 to 4 cm 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 group of patients on the stretcher and the patients without it ($p = 0.001$). The use of the device was generally well tolerated, only 2 patients had to decrease the number of hours of use due to moderate penile pain. No other complications were recorded.

Conclusions: Use of the penile extender device on an 8 to 12-hour daily regimen is an effective and safe way to minimize loss of penis length in patients operated for PD. Its use provides a significant improvement in HRQOL outcomes compared to the control group.



Andro-penis stretcher device

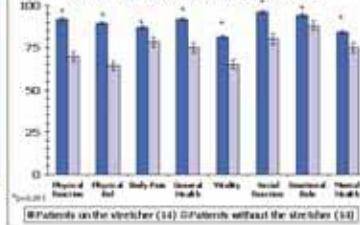


Way of using the device

RESULTS

Penis shortening ranged from 0.5 to 4 cm after surgery for PD. Sustained treatment for 4 months with the penile stretching device provided an increase from 1 to 4 cm 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 group of patients on the stretcher and the patients without it ($p = 0.001$). The use of the device was generally well tolerated, only 2 patients had to decrease the number of hours of use due to moderate penile pain. No other complications were recorded.

Mean Score of SF-36 by Dimensions With stretcher versus without stretcher



INTRODUCTION

Penis shortening is one of the commonest complications of Peyronie's disease surgery.

OBJECTIVES

To assess the value, in terms of increasing the length of the penis, of 8 to 12-hour daily application of a penile extender device (Andro-penis) after penile surgery for Peyronie's disease (PD). A secondary objective was to assess the health-related quality of life (HRQOL) outcome in patients using this device.

MATERIALS & METHODS

20 men, ages 54–64 years (mean 58), underwent penile surgery for PD. In eight patients were incision of the fibrous plaque and grafting was performed, while the rest (12) underwent excision of the plaque (Essex technique). 14 of the 20 patients were treated with a penile extender (Andro-penis device) daily (8 to 12 hours of continuous stretching ranging from 300 to 1200 gr.) over a 4-month period. Length and girth of the penis were measured before and after surgery and subsequently after the use of the penile extender. HRQOL was also determined using the SF-36 survey to compare both groups of patients.



Before and after Essex's plication showing shortening of the penis



Patient with the device in place

Evolution of penile length and girth

CONCLUSIONS

Use of the penile extender device on an 8 to 12-hour daily regimen is an effective and safe way to minimize loss of penis length in patients operated for PD. Its use provides a significant improvement in HRQOL outcomes compared to the control group.

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