

Design and Methods Over a five year period, ten patients (mean age 50 years, range 33-66) presented to our department with recurrent penile deformity despite previous corrective surgery using the Nesbit procedure. All had painless and stable Peyronie's disease. The mean angle of deformity was 51 degrees (range 10-90 degrees). They all underwent the Lue procedure using venous grafts from either the deep dorsal penile or the long saphenous veins.

Results Postoperatively 7(70%) patients had a residual angulation of between 0-10 degrees. Only one patient reported post operative penile shortening. All the patients reported either an excellent or satisfactory result.

Conclusions Patients with recurrent penile deformity due to Peyronie's disease can be effectively managed using the Lue procedure despite having undergone a previous Nesbit procedure.

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Early Rehabilitation after Induratio Penis Plastica Surgery: Our Experience

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Introduction and objectives We describe our experience in rehabilitation after Induratio Penis Plastica surgery.

Materials and Methods 24 patients were treated with Nesbit corporoplasty or with patch grafting. All subdivided in 3 groups, rehabilitation started from the 30th postoperative day and for 3 months. First group was treated with Vacuum device and Prednisone, second with PgE1 injection and Prednisone, third only with Prednisone.

Results After 3 months, among all patients, the penile shortening appeared lower in first group compared with other two groups. 2/3 of patients of the first and the second group recovered sexual activity from the second month in contrast with only 1/3 of third group.

Conclusions The rehabilitation with Vacuum device is better than others therapies for reduction of penile postoperative retraction. Both the Vacuum and the PgE1 injection can increase the recovering of patient's sexual activity.

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Corporoplasty Results in the Treatment of Peyronie's Disease

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Objectives We present a critical review of our experience in penile corporoplasty (PC) for Peyronie's disease (PD).

Methods We performed a retrospective analysis of 33 patients submitted to PC (Yachia technique) since 1991 to 2001. Admission protocol included clinical history, autophotography and penile curvature evaluation. We used the Levine and Lenting's algorithm for surgical treatment.

Results We achieved the surgical goal in 31 patients (success rate-93.9%). Nineteen patients completely corrected the penile curvature and twelve presented with a significant improvement. Twelve patients exhibited mild to moderate diminished penile rigidity, and six presented curvature recurrence within 2 years.

Conclusion Yachia's PC displays good results, especially in selected cases accordingly to Levine and Lenting's algorithm.

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Corporoplasty in advanced Peyronie's disease using venous- and /or dermis-patch or TachoComb®H grafting: New surgical technique and long-term patient satisfaction

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Objective Evaluation of long-term results and patient satisfaction of corporoplasty using saphenous vein-, dermis-patch or TachoComb®H grafting in patients with advanced Peyronie's disease.

Methods A total of twentyfive patients were included and followed over a mean period of 19 months. Postoperative patient satisfaction was assessed using the IIEF questionnaire. The mean preoperative grade of deviation in this collective was 86°.

Results Intraoperatively, the deviation was straightened in all patients. Postoperatively, 25% of the patients complained a penile shortage of 1-2cm and only two patients had a recurrence. The overall postoperative sexual satisfaction score was 2.76 (of 5).

Conclusions All techniques are safe and effective procedures for high grade Peyronie's disease. In case of an insufficient vein anatomy the dermis-patch interposition is a good alternative. The TachoComb®H corporoplasty has the advantage that graft harvesting is unnecessary. The limited IIEF score is likely due to a high preoperative patient's expectation of surgical correction.

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Efficacy of Daily Penis-Stretching Technique to Elongate the "Small Penis"

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Objectives The main surgical ask for penis elongation is of men having a penis size within the standard limits but not considered satisfactory by the subject ("small penis"). The aim of this study was to verify the efficacy of the penis-stretching physiotherapy for penis elongation.

Design and Methods Nine healthy men suffering from "small penis" were enrolled (range age: 26-43 years). The initial stretched penis length was 12.0 cm (range 8.1-15.4). The "Penistretcher ®" device was prescribed for at least 6 hours per day, for at least 4 months.

Results In all subjects the elongation of penis was proportional to the device time of use. After 4 months the stretched penis augmentation was +1.8 cm (range +0.5-+3.1 cm). The daily average use was 6½ hours (range 3-9 hours). No side effects occurred.

Conclusions Our data show the efficacy of the penis-stretching physiotherapy in the "small penis" treatment.

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Therapeutical Approach to Peyronie's Disease: Multicenter Study of Italian Society of Andrology

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A team of Italian Society of Andrology carried out a study to verify the therapeutical strategy for Peyronie's disease in Italian excellency centers. Specific multiple answers questionnaire have been sent to 30 centers.

Oral drugs after surgery (76% E, vitamine, 45% tamoxifene) are administered in the vast majority (26 of 30 centers), whereas fifteen centers use intralesional therapy (Cortisone, Verapamil, Colchicine).

Fifty-two % of surgically-treated patients underwent to conservative corporoplasties, 31% to plaque surgery and 17% to prostheses. Twenty-five of 30 centers perform plaque surgery (45% incision, 55% radical excision using Saphena in 44 % of cases, but also Alloderm, SIS).

They administer early post-surgical therapy (20 days after operation) with Sildenafil in 60% of cases, ICI (43%), Vacuum (38%), Cortisone (10%).

The study point out the great attention of most of Italian Centers to post surgical complementary therapies and to new biomaterials as substitute of tunica albuginea.