Peyronies

What is Peyronie's disease?

Peyronie's disease is a condition in which fibrous scar tissue – known as plaques – form under the skin of the penis, inside the erectile tissue. It causes a number of symptoms, initially with painful erections that tend to curve in the direction of the plaques. Peyronie's disease usually affects the top side of the penis and hence an upward curvature of the penis. It however can develop on the underside, or in some cases on both sides.

Peyronie's disease affects around 3% of men between the ages of 30 and 80. The condition negatively impacts the quality of life of the men who suffer from it. Unfortunately, many men with the condition may feel too embarrassed to seek medical help and suffer in silence.

Doctors Shekib Shahbaz and Tony De Sousa of Melbourne Urology Centre are experts in treating medical conditions affecting men. They pride themselves on their compassionate and approachable nature, providing professional care with a personal touch.

What causes Peyronie's disease?

In many cases, the cause of Peyronie's disease is unknown. There are, however some known risk factors for developing Peyronie's disease. These include:

- Trauma (injury) that bends the erect penis
- Infection of the penis
- Connective tissue disorders such as Dupuytren's disease
- Autoimmune conditions that cause plaques to form
- Family history, which suggests there is a genetic factor.

What are the symptoms of Peyronie's disease?

The symptoms and signs of Peyronie's disease may come about

suddenly, or over a period of time (weeks or months). Symptoms of Peyronie's disease may include:

- Flat lumps (plaques) of scar tissue can be felt under the skin of the penis
- The penis may be bent
- Erectile dysfunction or soft erections
- Painful erections
- Shortening of the penis
- Difficulty engaging in sexual intercourse

Peyronie's disease can be considered in two stages: the acute phase and the chronic phase. Bending of the penis occurs with both stages, however during the:

- Acute phase: plaques are actively forming, typically lasts 6-18 months, bending or curving of the penis gets worse, erections may be painful
- Chronic phase: plaques have matured or calcified, painful erections have often subsided and curvature stabilizes.

How is Peyronie's disease treated?

Peyronie's disease rarely goes away on its own. In most cases the condition worsens during the active phase.

Treatment may not be necessary however surgery is the only definitive option to correct penile curvature. Non-surgical treatments such as injections or traction devices have been investigated but have not proven to be very effective.

Surgery for the treatment of Peyronie's disease

Surgical correction of Peyronie's disease is the gold standard of treatment for restoring a functionally straight penis. Treatment of Peyronie's disease with surgery is considered in men who:

- Have stable, chronic disease
- · Have severe and debilitating deformity of the penis, which makes it

difficult for them to have sexual intercourse.

The aim of surgical treatment of Peyronie's disease is to correct the curvature of the penis, therefore allowing a functional straight erection. Some of the common surgical methods used include:

- Suturing (plication) of the unaffected side
 - used for less severe curvatures
 - results in a degree of shortening of the penis
- Incision or excision and grafting
 - used for more severe curvatures
 - some of the scar tissue may be removed
 - grafts are sewn into the gaps where the tissue was removed
 - higher risk of complications than with plication
 - · less risk of penile shortening
- Penile implants
 - may be considered for patients with both Peyronie's disease and erectile dysfunction that has not responded to medical treatment

Patient outcomes

If left untreated, Peyronie's disease usually stabilizes within the first 12-18 months, after which time the pain during erections subsides. The curvature and penile shortening usually stabilize during this time. Patients who undergo surgical correction are often able to obtain functionally straight erections that are suitable for sexual intercourse, improving their quality of life.

Written by Dr. Shekib Shahbaz and Dr. Tony de Sousa

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