



IMAGE ARTICLE

Simultaneous Complex Fracture of the Corpora Cavernosa Bilaterally with Total Disjunction of the Urethra: Case Report and Literature Review

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Keywords

Penile fracture, Urethral disjunction, Corpus cavernosum

Introduction

Penile fracture is a rare urological emergency described as the traumatic rupture of the tunica albuginea of an erect penis, it usually occurs during sexual intercourse. Patients typically report a sound at the time of the injury, described as a snapping sound, immediate detumescence, and subcutaneous hematoma [1].

Prompt surgical exploration and corporal repair is the most effective therapy. Urethral injury associated with a penile fracture is reported to be between 2 and 27% of cases; this latter should be systematically looked after [2-5].

The complications of these fractures are principally erectile dysfunction and deviation of the erect penis [6].

Case Presentation

We present the case of a rare presentation of a post-traumatic penis fracture during sexual intercourse in a 32-year-old young patient.

The patient was admitted to the emergency department in a picture of swelling of the penis with a blackish color and subcutaneous hematoma, with acute retention of urine. He also reported a snapping sound at the time of the trauma.

The diagnosis was retained on the arguments of the anamnesis and the clinic, without recourse to additional imaging.

Per operative exploration revealed a rupture of the two cavernous bodies with a total disjunction of the urethra with a hematoma opposite (Figure 1). We preceded the realization of a repair of the corpora cavernosa with realization of a primary urethroplasty using 5-0 polydioxanone suture with a simple interrupted end-to-end reanastomosis and placement of a urinary catheter.

The postoperative course was simple; the patient had discharged on D+2 with removal of the bladder catheter at 6 weeks. At 4 months, post-operatively the patient did not report any signs of dysuria or erectile dysfunction, however we noted a slight downward curvature of the penis which does not constitute difficulty in penetration during sexual intercourse.

Conclusion

The current literature highlights the varying practices regarding surgical exploration, injury repair, urethroplasty when involved and postoperative management in men with a penile fracture. Immediate penile exploration and tunica repair have been the mainstay approach of management.

Conflicts of Interest

None.



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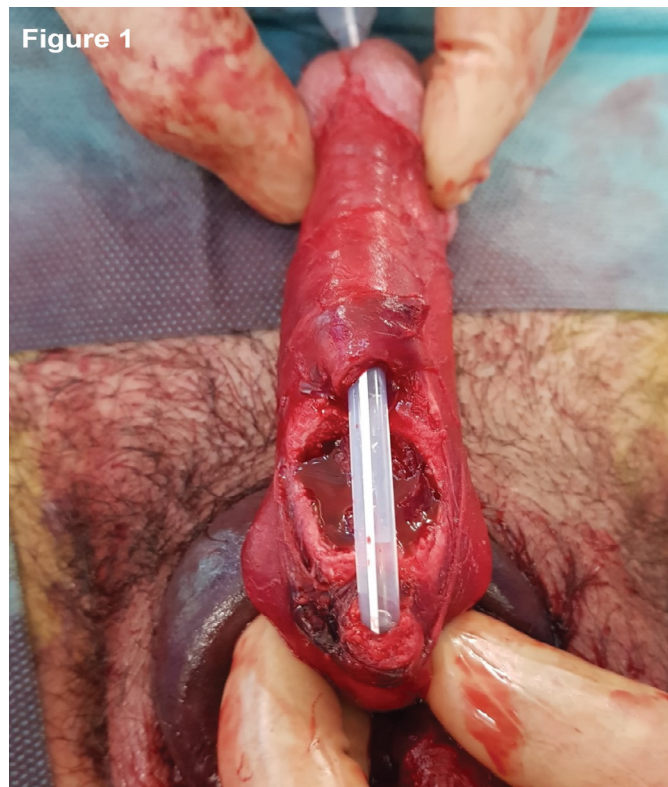


Figure 1: A per operative image of a complex penile fracture of corpora cavernosa bilaterally with total disjunction of the urethra.

Patient Consent

Obtained.

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