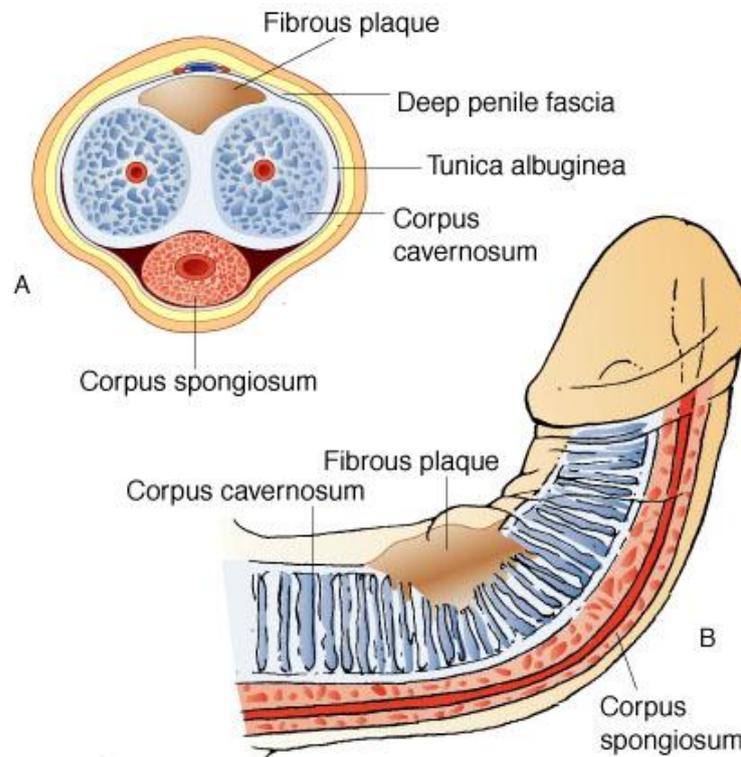


Peyronie's disease: frequently-asked questions

What is Peyronie's disease?

François de la Peyronie, a French surgeon in Montpellier, first described his disease in 1743 although there are simple descriptions of a similar problem as early as 1687. The first writers classified it as a form of impotence.

The disease is characterised by a plaque, or hard lump, that forms in the erectile tissue of the penis. It begins as a localised inflammation and can then mature into a hardened scar.



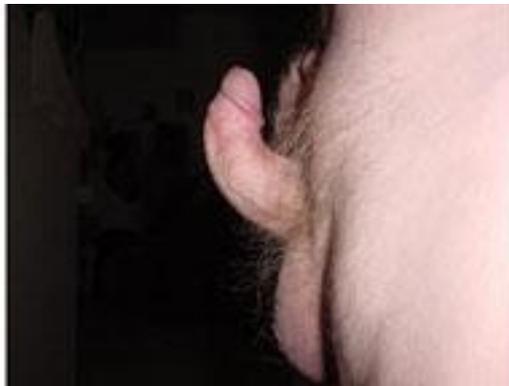
There are two erectile cylinders which run the length of the penis. The inner membrane of each chamber is a sheath of elastic fibres. A connecting tissue, called a septum, runs between the two chambers and attaches at the top and bottom of the penis. If the penis is abnormally squeezed or flexed, the area where the septum attaches to the elastic fibres may over-stretch, injuring the lining of the erectile chamber and rupturing small blood vessels. In older men, diminished elasticity, disease of the arteries and diabetes may further increase the chances of injury.

The damaged area may heal slowly but abnormally. In most patients, however, the injury heals within a year and the plaque does not advance beyond an initial inflammatory phase. In more persistent cases, the plaque undergoes scarring due to formation of tough, fibrous tissue and may even form calcium deposits.

While trauma might explain acute cases of Peyronie's disease, it does not explain why most cases develop slowly and with no apparent traumatic event. Neither does it explain why some cases disappear quickly.

There is an association with high blood pressure, diabetes, raised cholesterol levels, ischaemic heart disease and arteriosclerosis as well as with certain drugs (beta-blockers, anti-ulcer agents, antidepressants and antihistamines).

What problems does it cause?



Peyronie's disease usually occurs in a mild form that heals without treatment in 6 to 15 months. In severe cases, the hardened plaque reduces flexibility, causes pain and forces the penis to bend during erection.

The plaque itself is benign (non-cancerous). A plaque on the top of the shaft (most common) causes the penis to bend upward; a plaque on the underside causes it to bend downward. In some cases, the plaque develops on both top and bottom, leading to indentation and shortening of the penis. At times, pain, bending, and emotional distress prohibit sexual intercourse.

How common is it?

Peyronie's disease occurs in approximately 3% of men. Although the disease occurs mostly in middle-aged men, younger and older men can acquire it. About 10 percent of people with Peyronie's disease develop fibrosis (hardened cells) in other elastic tissues of the body such as the hand or foot. A common example is a condition known as Dupuytren's contracture of the hand. 3% of men with Dupuytren's contracture also have Peyronie's disease. In some cases, men who are related develop Peyronie's disease, which suggests that familial factors might make a man vulnerable to the disease.

Are there any problems with surgery?

Most types of surgery produce positive results. But complications can occur, and because many of the phenomena associated with Peyronie's disease (for example, shortening of the penis) are not corrected by surgery, most doctors prefer to perform surgery only on the small number of men with curvature so severe that it prevents sexual intercourse.

Summary

In general, Peyronie's disease requires no treatment because it is likely that the condition will improve spontaneously. However, this may take 12-18 months and the problem may not disappear completely.

We now discourage referral for treatment except in the early, painful stages of the disease (when drugs may be helpful) or in the late stages where the penis is too bent or too floppy to allow penetration for normal intercourse and where spontaneous improvement has not occurred.

Who can I contact for more help or information?

Oncology Nurses

- Uro-Oncology Nurse Specialist
01223 586748
- Bladder cancer Nurse Practitioner (haematuria, chemotherapy & BCG)
01223 274608
- Prostate cancer Nurse Practitioner
01223 274608

Non-Oncology Nurses

- Urology Nurse Practitioner (incontinence, urodynamics, catheter patients)
01223 274608 or 586748

Patient Advice & Liaison Centre (PALS)

- Telephone
+44 (0)1223 216756 or 257257
+44 (0)1223 274432 or 274431
- PatientLine
*801 (*from patient bedside telephones only*)
- E mail
pals@addenbrookes.nhs.uk
- Mail
PALS, Box No 53
Addenbrooke's Hospital
Hills Road, Cambridge, CB2 2QQ

Chaplaincy and Multi-Faith Community

- Telephone
+44 (0)1223 217769
- E mail
derek.fraser@addenbrookes.nhs.uk
- Mail
The Chaplaincy, Box No 105
Addenbrooke's Hospital
Hills Road, Cambridge, CB2 2QQ

MINICOM System ("type" system for the hard of hearing)

- Telephone
+44 (0)1223 274604

Access Office (travel, parking & security information)

- Telephone
+44 (0)1223 586969

Other information

This leaflet contains guidelines and advice from professional bodies, together with information about the prescription of drugs. All NHS hospitals have local arrangements with their Primary Care Trusts (PCTs) about which medicines can be used. As a result, some drugs mentioned cannot be prescribed by local hospitals.

Treatment of patients will be planned with the Consultant responsible for care, taking into account those drugs which are or are not available at the local hospital and what is appropriate for optimum patient care.

Healthcare professionals are advised to check prescribing arrangements with their local hospital or PCT.

How can I get information in alternative formats?

Please ask if you require this information in other languages, large print or audio format: 01223 216032 or patient.information@addenbrookes.nhs.uk

Polish Informacje te można otrzymać w innych językach, w wersji dużym drukiem lub audio. Zamówienia prosimy składać pod numerem: 01223 216032 lub wysyłając e-mail: patient.information@addenbrookes.nhs.uk

Portuguese Se precisar desta informação num outro idioma, em impressão de letras grandes ou formato áudio por favor telefone para o 01223 216032 ou envie uma mensagem para: patient.information@addenbrookes.nhs.uk

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Cantonese	若你需要此信息的其他語言版本、大字體版或音頻格式，請致電 01223 216032 或發郵件到： patient.information@addenbrookes.nhs.uk
Turkish	Bu bilgiyi diger dillerde veya büyük baskılı ya da sesli formatta isterseniz lütfen su numaradan kontak kurun: 01223 216032 veya asagıdaki adrese e-posta gönderin: patient.information@addenbrookes.nhs.uk
Bengali	এই তথ্য বাংলায়, বড় অক্ষরে বা অডিও টেপে পেতে চাইলে দয়া করে 01223 216032 নম্বরে ফোন করুন বা patient.information@addenbrookes.nhs.uk ঠিকানায় ই-মেইল করুন।



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Document history

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