To evaluate our experience on diagnosis and management of penile fractures.

MATERIALS AND METHODS:

This retrospective study included 31 patients who were treated for penile fracture between 2002 and 2012. We analyzed the etiology of penile fracture, concomitant pathologies such as urethral injury, deep or superficial dorsal vein ruptures, treatment modalities (surgery or conservative treatment) and complications of treatment modalities.

RESULTS:

The mean age of the patients was 32 years (range, 23-47 years). In 27 patients (87 %), the cause of penile fracture was sexual intercourse. Patients presented with swelling, pain and popping or cracking sound in penis. The diagnosis of penile fracture was established clinically in all of the patients. There were no urethral injuries or dorsal vein ruptures. Ten patients who refused surgical treatment were treated conservatively and remaining 21 patients with early surgical intervention. Among conservatively treated patients, two suffered from erectile dysfunction, two from painful erection and another two from penile curvature. No serious complications such as erectile dysfunction, penile curvature or painful erection were observed in surgically treated patients.

CONCLUSION:

Penile fracture can be diagnosed easily with history and physical examination, and favorable functional results can be achieved with early surgical repair.