CORRELATION OF PRE-OP STRETCH-TEST & POST-OP PENILE MEASUREMENT FOR INFLATABLE PENILE PROSTHESIS (IPP)
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Presented at the 2009 Sexual Medicine Society of North America Conference

ABSTRACT

Introduction and Objective: Penile shortening post IPP implant continues to be a concern for all prosthetic urology surgeons. Realistic discussion of post-op, penile length is an imperative aspect of overall patient care. The hypothesis was to develop a predictive index to communicate length estimates.

Methods: Data represents single surgeon review of 53 consecutive virgin IPP patients for pre-op and post-op length measurements to show relative correlation with a reproducible test, potentially conducted in the office setting. All patients received a Coloplast Titan® (Coloplast Corp, Minneapolis) IPP, with distribution amongst core sizes (16cm, 18cm, 20cm, 22cm) at 2%, 42%, 45% and 11% respectively. RTE’s were used in 47% of the cases. Intraoperative correction of penile angulation was conducted in 14/53 (26.4%) of the cases.

Results: Patients were reviewed prior to implantation of the inflatable penile implant. All patients were measured prior to incision, with a Furlow, at the dorsal aspect of the penile shaft from body plane to mid-glans (Paul clarify measurement). Pre-op, the patient was hydrodilated via saline-infusion to create an artificial erection and remeasured at the same points. Three-piece devices were placed by the same surgical team, all via Infrapubic approach. Post-operatively, all IPP’s were inflated and the anatomy remeasured. There was a smaller average difference associated with the Penile Stretch test results (mean = -.075 cm) than those for the Artificial Erection test (mean = 0.509), with similar estimates of the variability (as measured with the standard deviation). The differences between pre-operative and final operative measurements were also classified as a success (< 0.5 cm) or not (≥ 0.5 cm). Based on this classification, the Penile Stretch test had a success rate of 75.5% (40/53) versus 71.7% (38/53) for the Artificial Erection.

Conclusions: The use of the Penile Stretch Test as a potential predictive index for the length outcome of IPP procedures may lend value to both surgeons and patients.