

Penile lengthening in a child sustained amputation during mass circumcision: A case report

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Case Report

Four years old boy sustained mass circumcision when he was 2 year old resulted in amputation of the glans penis and part of the penile shaft. The child present with penile stump just few millimeters above the pubic skin with urethral meatus located at the penoscrotal junction. Fig(1)

We did mobilization of the corpora by detachment of the suspensory ligament through half circumferential incision at the dorsal penile aspect. This incision extended as U shape incision ventrally to the scrotum. We cover the degloved penile shaft with skin flaps taken bilaterally from the pubic skin. Other flap taken from the scrotum to cover an other defect that remains at the ventral area. Fig (2,3,4). Hypospadias left to be performed in a second stage 3 months later.

Discussion:

About 25% of the total world male population is circumcised and the circumcision remains one of the oldest and commonest operations performed all over the world ⁽¹⁻⁴⁾. The complication rates of the procedure range between 0.19% and 3.1% ^(1,5). Linus I O studied the epidemiology of complication of male circumcision in Ibadan, Nigeria found that circumcision rate was 87%. Of their study, complications of circumcision occurred in 65cases (20.2%) of the children. Of those who sustained these complications, 2 cases (3.1%) sustained amputation of the glans penis ⁽⁶⁾.

Several studies reported high prevalence of complications when circumcision was conducted by untrained personnel. Osuigwe et al reported that midwives were associated with 30.6% complications compared to physician at 14.5%. However, physician at university teaching hospital were associated with fewer complications compared to private and mission hospitals ⁽⁷⁾.

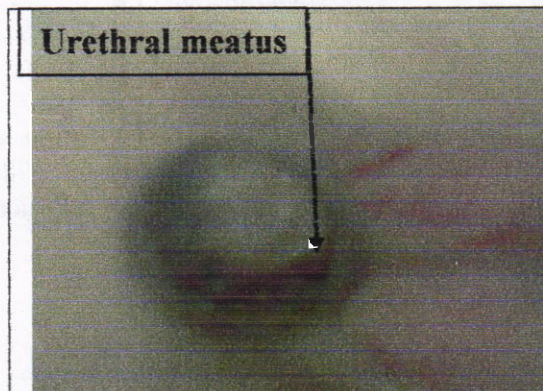
Detaching the penile suspensory ligament may help to prevent retraction and almost 3 cm of lengthening may be obtained. This is a useful method of treatment for penile amputation ⁽⁸⁾. Phalloplasty using therapy in children with traumatic loss of penis. It restores the function and cosmetic aspect of the organ, and makes sex reassignment to the female gender unnecessary. Replantation of the penis must be attempted when the amputated organ is recovered. A microvascular technique is recommended ⁽⁹⁾.

Circumcision is an important surgical procedure which has life-long effect and should be performed singly at medical institution by trained medical staff. Mass circumcisions commonly organized for self advertisement or for propaganda cause significant risk and should be stopped as soon as possible ⁽¹⁰⁾.

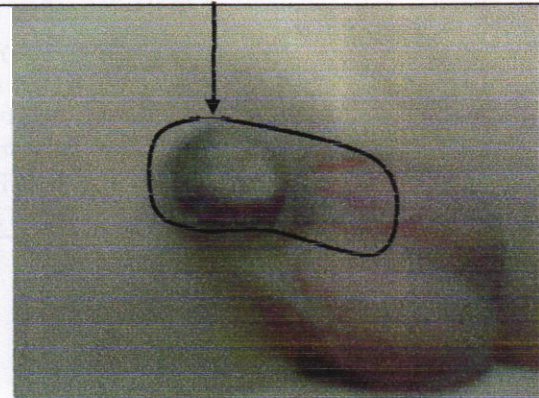
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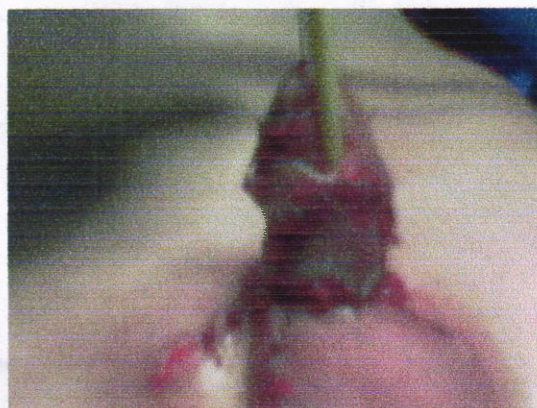
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Fig(1): Penile stump with penoscrotal location of retracted urethral meatus.



Fig(2) Line of incision.



Fig(3) ventral view of the final result



Fig(4) Lateral view of the final result