Penile Prosthesis

Penile prostheses are semi-rigid or inflatable devices that are implanted into the penis as a treatment for *erectile dysfunction* (a type of impotence). Erectile dysfunction (ED) may be caused by a number of conditions, such as:

- Blood vessel (*vascular*) diseases.
- Diabetes.
- Nervous system (*neurologic*) diseases.
- Psychological (stress and anxiety) problems.
- Trauma (like spinal cord injuries).
- Heavy smoking/drinking.
- Prolonged drug abuse.
- Surgeries (like removal of the prostate gland).

Penile prosthesis surgery is a procedure for men suffering from ED who have unsuccessfully tried all other treatment options. This surgery is not recommended if you are suffering from ED due to psychological problems. There are two main types of implants used for the surgery.

- Malleable penile implant (also known as non-hydraulic or semi-rigid implant).
  - This consists of two silicone rubber rods.
  - These help by providing a certain amount of rigidity.
  - They are also flexible, and hence, the penis can either be curved downwards in the normal position or put into an erect position for intercourse.
- Inflatable penile implant (also known as hydraulic implant).
  - This consists of cylinders, a pump, and a reservoir.
  - There are different types of inflatable implants. Each has advantages and disadvantages.
  - The cylinders can be inflated with fluid that helps in having an erection and deflated after intercourse.

BEFORE THE PROCEDURE

- You may be asked to shower with a special soap the night or morning before surgery.
- You may be given intravenous antibiotics one hour before the surgery.
- Hair will be removed from your surgical site and the site will be thoroughly cleansed.
- You may be given regional anesthesia or general anesthesia.
- On the day of the surgery, a *Foley catheter* (a soft, thin, flexible rubber tube) may be passed through the *urethra* (urinary passage) into the bladder.
  - The tube will drain urine.
  - The catheter will also help in guiding your surgeon to identify the urethra during the procedure.

LET YOUR CAREGIVER KNOW ABOUT:

- Allergies.
- Use of steroids (by mouth or creams).
- Medicines you take including:
  - herbs.
  - eye drops.
  - prescription medicine.
  - over the counter medicine.
  - creams.
- Use of aspirin or blood-thinning medicines.
- History of blood clots (*thrombophlebitis*).
- Previous surgery.
- Previous problems with anesthetics.
- History of bleeding or blood problems.
- Other health problems such as:
  - Urinary tract infections.
  - Skin infections.

PROCEDURE

- A small incision is made in the scrotum or in the penis just below the head.
- The cylinders of the prosthesis are inserted by the surgeon into the erectile tissue of the penis.
- Additional small incisions are made in the abdomen and in the scrotum to insert the pump and the reservoir of the inflatable device.
- The cylinders, reservoir (filled with fluid), and pump will be joined by tubes, and tested before your incisions are closed.

- The incisions are closed using dissolvable sutures.

RISKS & COMPLICATIONS OF THE PROCEDURE

- Your penis may be slightly shorter than it was before surgery.
- Your urethra may be injured during the procedure.
- Infection could occur to your penile implant. Rarely, this may occur months or years after the surgery.
- Your implant device may not function properly (mechanical failures).

AFTER THE PROCEDURE

- The surgeon may prescribe medicines to ease pain.
- You may also be given antibiotics.
- You may be put on a clear liquid diet for the first 24 hours.
- You may be asked to walk or sit instead of lying down. It is helpful to avoid long periods of immobility.
- A towel roll may be placed under your scrotum to help reduce swelling.
- The Foley catheter may be removed in the morning after surgery.

HOME CARE INSTRUCTIONS

- Follow all the instructions that were given by your surgeon at the time of discharge.
- You may shower.
  - Carefully wash the incision area with soap and water, rinse, and pat dry.
  - **Do not soak the wound or swim.**
- Follow a well-balanced diet. Eat plenty of fruits. Drink fluids regularly to prevent constipation.
- Take all prescribed medicine as instructed.
- Go for regular caregiver follow-up appointments as advised.
- Avoid sexual activity for around 6 weeks.
  - The device will not be activated until after the recovery period. Then your caregiver will instruct you on using the device.
- **Do not lift heavy objects for 4-6 weeks after surgery.**
- **Do not wear tight fitting clothes. Wear clothes that are loose and comfortable.**
- **Do not drive any vehicles or sign any legal documents, as long as you are on narcotic pain medicines.**

SEEK MEDICAL CARE IF:

- You develop nausea and vomiting.
- You develop chills and/or fever of 100.5° F (37.8 °C) or higher.
- You develop constipation.
- You develop swelling around the scrotal or penile area.
- You develop difficulty in passing urine.
- You develop a burning feeling or pain when passing urine.

SEEK IMMEDIATE MEDICAL CARE IF:

- You notice oozing of fluid or pus from the incision site.
- You notice blood in your urine.
- You develop severe pain that is not relieved with medicine.
- You develop chills and/or fever of 102.5° F (39.2 °C) or higher
- You are not able to pass any urine.

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