

S119**Controversies in penile fracture treatment**

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Introduction and Objectives: Penile fracture presents just a small percent of injuries of male urogenital tract because of penis mobility and its topography. Penile fracture has unusual etiology and if it is not treated adequately can lead to serious consequences. The aim of work is to properly determine early and late complications in patients with penile fracture who treated conservatively because of certain circumstances, or adequately by surgery. The main question is which kind of therapy to apply?

Material and Methods: In last three years in Urology and Nephrology Clinic of Clinical Center of Montenegro were treated 11 patients with penile fracture. Patients were age 24 to 61. Seven patients (64%) came on medical examination 48 hours after injury, or were on conservative therapy, or they didn't come at all because of paramedical reasons. Four patients (36%) came as urgent cases and, after properly implemented diagnostic, has been done surgical intervention

Results: From 11 patients, at 4 (36%) of them who were under surgery, preserved erectile function is detected without presence of penile deformation or plaque in place of rupture. Those patients are advised abstinence from sexual activity for 4 weeks. Rupture on tunica albuginea was always transversal and it was located on the base of penis, or on its middle third. In 6 patients (55%) who were treated conservatively because of certain life circumstances, was registered plaque which in 3 patients was larger than 2 cm in longitudinal diameter and sexual dysfunction was present at all of them. In all patients with erectile dysfunction was found plaque similar to lesion in Peyronie's disease.

Conclusions: It is evident that complications in patients treated conservatively are present in larger percent, in fact, they are always present, and there are no important complications when penile fracture is treated surgically. All presented speaks enough about importance of surgical treatment of penile fracture and that is very important to understand it as urgent urological injury which requests adequate surgical treatment.

S120**Penile fracture – Series of cases**

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Introduction and Objectives: To inform the practitioners about this rare condition of urological emergencies which requires early surgical management.

Material and Methods: Between January 2004th and December 2007th, 21 patients with penile fracture were treated on our department, from them 18 with surgery and 3 with medicaments. Mean age was 39 years (range 26–54). Two cases were attributed to masturbation and 19 to violent sexual intercourse. Hospital admittance varied from one hour to three days. Clinical diagnosis was enough in majority of the case.

Results: The tear was more frequent on the right side (60%), proximal part of penis (60%) and ventral localization (80%). Only in two cases laceration of spongyous urethra was detected and in one with laceration of urethra. The tear size ranged from 3.0–12.0 mm with mean size of 7 mm. Surgical treatment consists of evacuation of the hematoma, identification of the

tunica injury, local debridement if it is necessary and closure of the tunica laceration with an absorbable suture. No operative and perioperative complications from first to third day until discharge from the hospital were present. After two years of follow up, 2 patients had light curvature, 2 with painful erection. Sensory loss, voiding difficulty, skin necrosis were not registered.

Conclusions: The best treatment for penile fracture is early surgery with functional and aesthetic benefit.

S121**Patients with vaginal agenesis (Mayer-Rokitansky-Küster-Hauser syndrome) – their psychosocial and psychosexual aspects after reconstructive surgery**

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Introduction and Objectives: The main goal in patients with vaginal agenesis (Mayer-Rokitansky-Küster-Hauser syndrome) is creation of a neovagina that will satisfy patient's needs and desire. We evaluated sexual and psychosocial adjustment in patients who underwent rectosigmoid vaginoplasty due to vaginal agenesis.

Material and Methods: We evaluated 22 women, aged 21 to 38 years (mean 26) who underwent rectosigmoid vaginoplasty. Sexual and psychosocial appraisal included the Female Sexual Function Index (FSFI), Beck's Depression Inventory (BDI) and standardized questionnaires about postoperative satisfaction, social and sexual adjustment.

Results: The mean follow-up was 5.3 years (range 5 months to 13 years). Two patients with no sexual intercourse were excluded from the study. Mean FSF Index (FSFI) was 29.4 (range 11.5–35.7) with cut-off score 26.55 for sexual dysfunction. Five (25%) of 20 women, reported sexual dysfunction. Mean Beck Depression Inventory (BDI) was 6.9 (cut-off score 0–9 for non-depression). A 14 women (70%) was without symptoms of depression, 4 (BDI ranged from 10–18) had moderate and two had severe depression (BDI 42). There were significant level ($p < 0.01$) within high satisfaction score in FSFI and low BDI results after completed statistical analysis. That indicates important predictive variable between one FSFI domain and psychological status. An 82% (18/22) of the patients believed that surgery was done at the right time and the most important postoperative support came from their family. A 91% of the patients reported satisfactory femininity with heterosexual orientation. 17 patients (77%) were satisfied with surgery, while 19 considered that this surgery is the best treatment.

Conclusions: Sexual function and psychosocial status of patients who underwent rectosigmoid vaginoplasty is not affected in general and achieved complete recovery. Predictive factor for sexual dysfunction is associated with lower orgasm score, while higher desire directly influences positive sexual function on the FSFI. Lack of depression and presence of sexual function precisely correlate with higher satisfaction. Multidisciplinary approach is essential for successful postoperative outcome and better quality of life.

S122**Feminizing reconstruction of the external genitalia in childhood age**

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Introduction and Objectives: The goal of this report is to show our method for feminizing reconstruction of the external genitalia in different intersexual conditions (hermafroditism).