

## Effects of plication procedures in special cases of Peyronie's Disease: a single-center retrospective study of 72 patients



### Abstract

General recommendations regarding surgical techniques are not always appropriate for all Peyronie's disease (PD) patients. Therefore, the purpose of this study was to investigate the effects of plication procedures in PD patients with severe penile curvature

and the effects of early surgical correction in patients who no longer have progressive deformities.

The clinical data from 72 patients who underwent plication procedures were analyzed in this study. Patients were divided into Groups A and B according to the curvature severity ( $\leq 60^\circ$  or  $>60^\circ$ ) and Groups 1 and 2 according to the duration of disease stabilization ( $\geq 3$  months or  $< 3$  months). At the 1-year follow-up, 90.0% (36/40) and 90.6% (29/32) patients reported complete penile straightening, and 60.0% (24/40) and 100.0% (32/32) patients reported penile shortening in Groups A and B, respectively.



No curvature recurrence occurred in any patient, and no significant differences were observed in postoperative International Index of Erectile Function-Erectile Function domain (IIEF-EF), erectile pain, sensitivity, or suture knots on the penis whether such outcomes were grouped according to the curvature severity or the

duration of stabilization. However, the duration from symptom onset to surgical management in Group 1 was significantly longer than that in Group 2 (mean  $\pm$  standard deviation [s.d.]:  $20.9 \pm 2.0$  months and  $14.3 \pm 1.2$  months, respectively,  $P < 0.001$ ). The present study showed that the plication procedures seemed to be an effective choice for the surgical treatment of PD patients with severe penile curvature. In addition, the early surgical treatment seemed to benefit those patients who already had no erectile pain and no longer exhibited progressive deformity.

**Keywords:** Peyronie's disease; penile curvature; plication.

**Resource:**<https://pubmed.ncbi.nlm.nih.gov/35381692/>