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Peer reviewed
Man with Penile Pain

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CASE PRESENTATION

A 39-year-old man presented to the emergency department for two days of worsening pain and swelling to the base of his penis. The patient denied trauma or a history of coagulopathy, had a non-contributory sexual history, and no recent use of erectile dysfunction medications. Examination demonstrated mild swelling to the penile base without evidence of hernia, infection, or shaft injury.

Computed tomography (CT) revealed penile asymmetry (Image 1). Ultrasound demonstrated asymmetric fullness of the right corpus cavernosum. Pelvis magnetic resonance imaging (MRI) revealed an enlarged appearance of the right corpus cavernosum with hypointense T2 signal (Image 2) and hyperintense T1 signal (Image 3). These findings were consistent with a partial segmental thrombosis of the right corpus cavernosum (PSTCC). The patient was admitted for pain control and discharged after symptom resolution with...
anticoagulation therapy. Upon outpatient follow-up, the patient had no persistent complications.

DISCUSSION

PSTCC is a rare condition that manifests as penile or perineal pain and swelling. Thrombus formation likely arises secondary to microtrauma, thrombophilia, hemoglobinopathies and, rarely, medication side effect. Ultrasonography or MRI are recommended diagnostic modalities, while CT is reportedly suboptimal due to decreased sensitivity for this condition. Our case departs from the literature as CT and MRI were most useful. Additionally, because CT clearly demonstrates the pathology in this case, it may be a better diagnostic modality than previously reported in this rare phenomenon and serve as a rapid diagnostic tool in some cases. Early urologic consultation is recommended, with typical management consisting of anticoagulation and pain control. PSTCC has an overall favorable prognosis rarely incurring long-term complications.

The authors attest that their institution requires neither Institutional Review Board approval, nor patient consent for publication of this image in emergency medicine. Documentation on file.

REFERENCES