

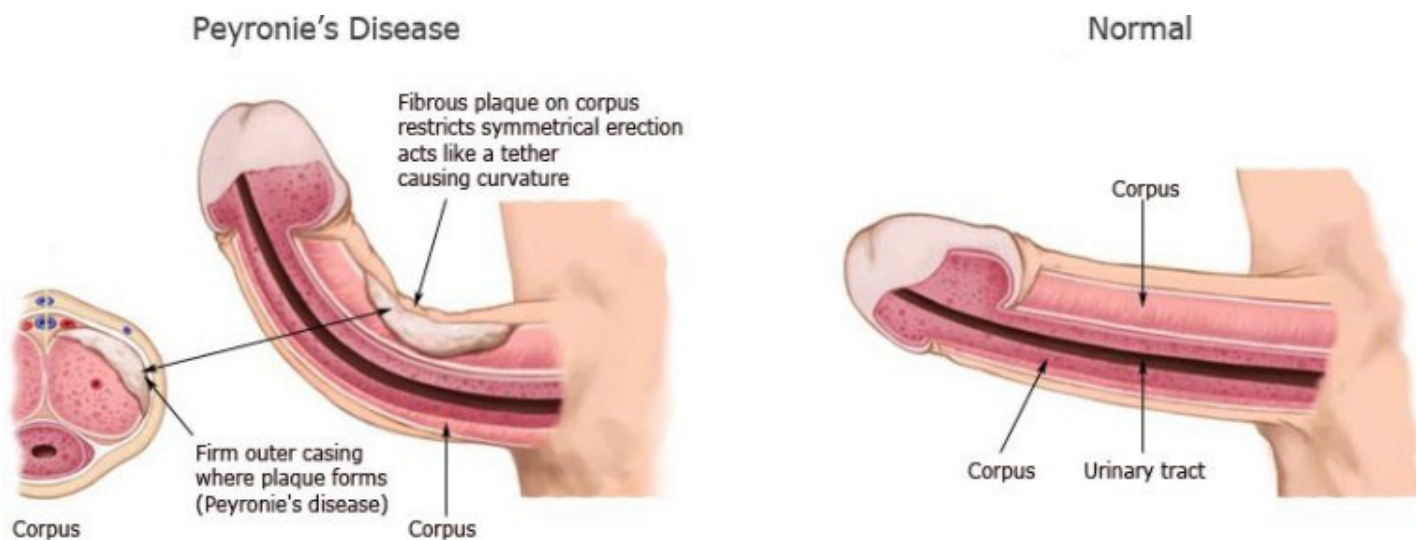
## Peyronie's Disease: An Explanation

This handout explains the basics of Peyronie's disease including important anatomy, what to expect if diagnosed with Peyronie's, and treatment considerations. **For an electronic copy of this brochure and more information on Peyronie's, we encourage you to visit our website at [www.MensHealthIN.com/services/peyronies-disease](http://www.MensHealthIN.com/services/peyronies-disease).** There we have several educational resources including video content and other handouts.

### What Is Peyronie's Disease?

Named after the 18<sup>th</sup> century French physician Francois Gigot de la Peyronie, Peyronie's disease (also known as PD) is a scarring disorder of the penis that typically presents as a new-onset bump or curve with erections. This scarring can cause other changes to the penis as well, including both penile shortening and erectile dysfunction. Peyronie's disease often ranges in severity, with some men only noticing a slight 'knot' under the penile skin and others experiencing curvature and distortion so severe that sex becomes impossible.

Although Peyronie's disease is estimated to affect up to 1 out of 10 adult men, it's often not talked about. Fortunately, effective treatment is possible provided men seek out the counsel of an experienced urologist specializing in male sexual medicine.



### What Causes Peyronie's Disease?

Peyronie's disease is caused by the formation of irregular scar tissue in the erectile bodies of the penis. Nobody really knows why certain men form this scar tissue. Although 20% of men can remember a specific injury sustained during sex, most cannot. For these men, many

experts believe that the normal 'wear and tear' that the penis typically experiences during healthy sexual activity may be what prompts this scar tissue to form.

Regardless of the cause, it's important for men to know is that Peyronie's disease is not their fault. Many men often blame themselves for their Peyronie's disease and believe that it's the result of a mistake they made. While certain medical conditions may predispose men to developing Peyronie's (like erectile dysfunction, Dupuytren's contracture, or diabetes), Peyronie's can affect any adult man at any point in their life. It is nothing to be ashamed of and safe, effective treatment is available.

### **How Is Peyronie's Disease Diagnosed?**

Many men will often diagnose themselves after noticing a 'lump' or 'bump' in their penis and a new curve with their erections. Physicians can confirm the diagnosis with a careful physical exam and diagnostic testing. At the Men's Health Center at Urology of Indiana, our fellowship trained experts use **penile duplex ultrasound** to get the most accurate diagnosis possible and provide a personalized treatment plan. We will frequently order this test as part of a man's first visit to our clinic or shortly thereafter. Visit our website to learn more about penile duplex ultrasound.

### **What Should I Expect With Peyronie's Disease?**

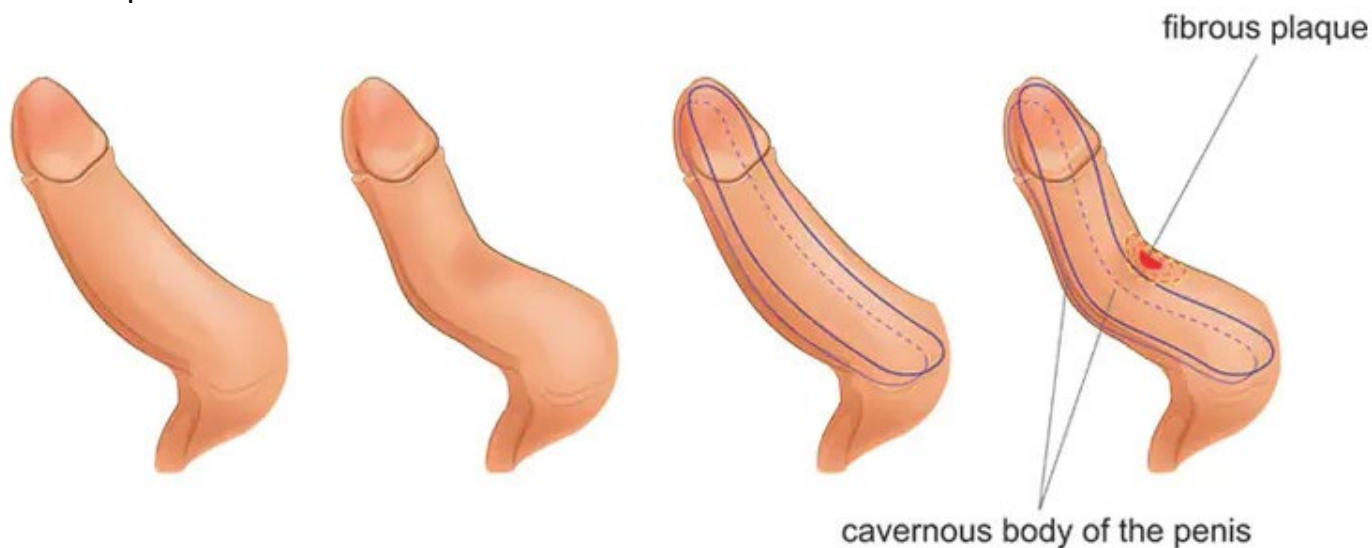
Most specialists divide Peyronie's disease into two phases: active and stable. The active phase of Peyronie's disease is the when the scar tissue first begins to form and change. This typically starts when men first notice a painful 'lump' or 'bump' in their penis and a new curvature with their erections. This scar tissue is usually quite tender at first and erections are frequently painful. In most cases, this scar tissue will then 'mature' over the next several months as penile curvature increases and the pain fades. Once the curvature is no longer changing, Peyronie's is considered to have reached stable phase.

Unfortunately, Peyronie's disease rarely resolves on its own and frequently requires treatment for men to regain a healthy sex life. When questioned several months after an initial diagnosis of Peyronie's disease without treatment, 40% of men will report no change in curvature and 48% will report worsening curvature while only 12% will report an improvement.

### **How Does Peyronie's Disease Change The Penis?**

The scar tissue that causes Peyronie's can negatively affect the anatomy of the penis in several ways. A new penile curvature that becomes more apparent with erections may be the most

common change but other changes including penile shortening, narrowing, and erectile dysfunction are also possible. Some men have even reported losing half of their former erect penis length because of their Peyronie's. These anatomic changes can make often sex difficult or even impossible.



### Can Peyronie's Disease Be Treated With Oral Medicine?

The use of oral medications in the treatment of Peyronie's disease is debated amongst experts. There just isn't enough data to support significant curvature improvement with oral medication alone. However, our experts will utilize oral medication in select men in the active phase of Peyronie's as part of multi-modal therapy that includes traction. As there are no FDA approved oral medications for Peyronie's, the use of these medications is considered 'off label'. These medications are very safe when used in men with Peyronie's though and have been approved by the FDA for other indications.

### What Are My Treatment Options And Which Is Right For Me?

Ultimately, Peyronie's disease is an anatomic problem that requires an anatomic solution. The treatments used to treat Peyronie's disease in the stable phase fall into 3 main categories: 1) Traction Therapy 2) Injection Therapy and 3) Procedures. If you want to learn more about these options, check out our handout discussing Peyronie's treatment options on our website at [www.MensHealthIN.com/services/peyronies-disease](http://www.MensHealthIN.com/services/peyronies-disease).

Deciding which treatment is best for any man with Peyronie's disease is a complex and nuanced process. There are 4 questions that help guide therapy when trying to decide which treatment is most likely to be successful.

### 1) Is your Peyronie's disease bothersome enough that you desire treatment?

Many men simply desire reassurance that they're not dealing with a cancer or other major health threat. However, if your Peyronie's disease is interfering with sex, your self-image or is otherwise bothering you, then you deserve treatment!

### 2) Is your Peyronie's disease in the active or stable phase?

Most men who are still in the active phase of their Peyronie's disease should avoid moving forward with surgery or treatment with Xiaflex until they've reached the stable phase. These men may benefit from certain oral medications as we discussed earlier along with at-home traction therapy until their curve is no longer changing.

### 3) Are you dealing with any significant level of erectile dysfunction?

Some treatments for Peyronie's disease have the potential to affect erections, either positively or negatively. If a man has significant erectile dysfunction along with his Peyronie's disease, then he's most likely to benefit from penile implant placement. The penile implant is unique in that it offers excellent curve correction while simultaneously curing almost any man's erectile dysfunction in what is typically a 30-minute outpatient procedure. If a man has excellent erectile function, then other options can be considered including Xiaflex, plication, and plaque excision and grafting.

### 4) What is the anatomy of your curvature?

No two Peyronie's curves are the same and different types of curvature are better suited for certain treatments. There are several variables to consider when evaluating a man's anatomy. These include the degree of curvature, the presence or absence of a palpable plaque, the presence of any calcifications within that plaque, the presence of other abnormalities such as 'waisting' or 'hinging', and whether there is poor erectile quality past the point of curvature. The anatomy of a man's curve is best assessed through one of two diagnostic tests known as an in-office intracavernosal injection test or a penile duplex ultrasound. Both tests allow for accurate assessment of curvature anatomy while the penile duplex provides additional data on the quality of blood flow to and from the penis.

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