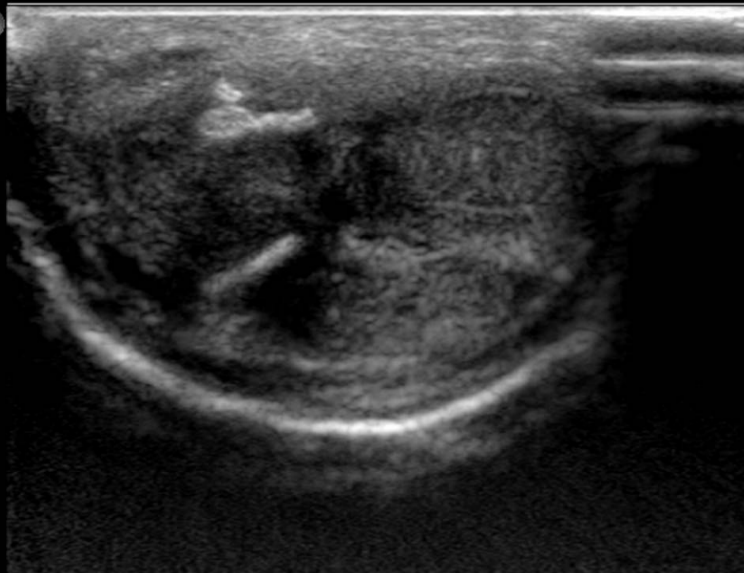


Case of the Week

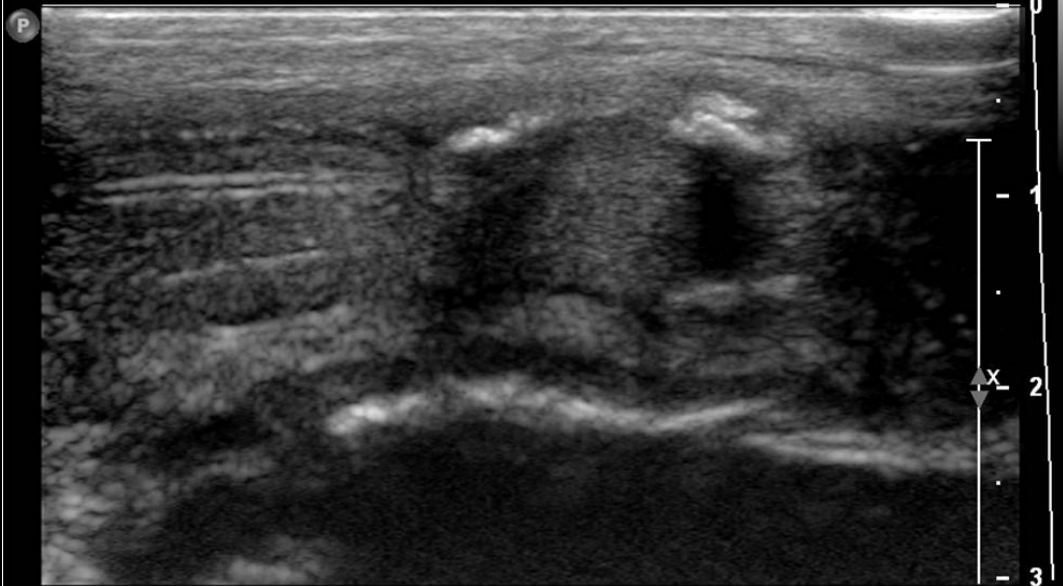
Hemang Kotecha, DO
November 15, 2016



37M with erectile dysfunction

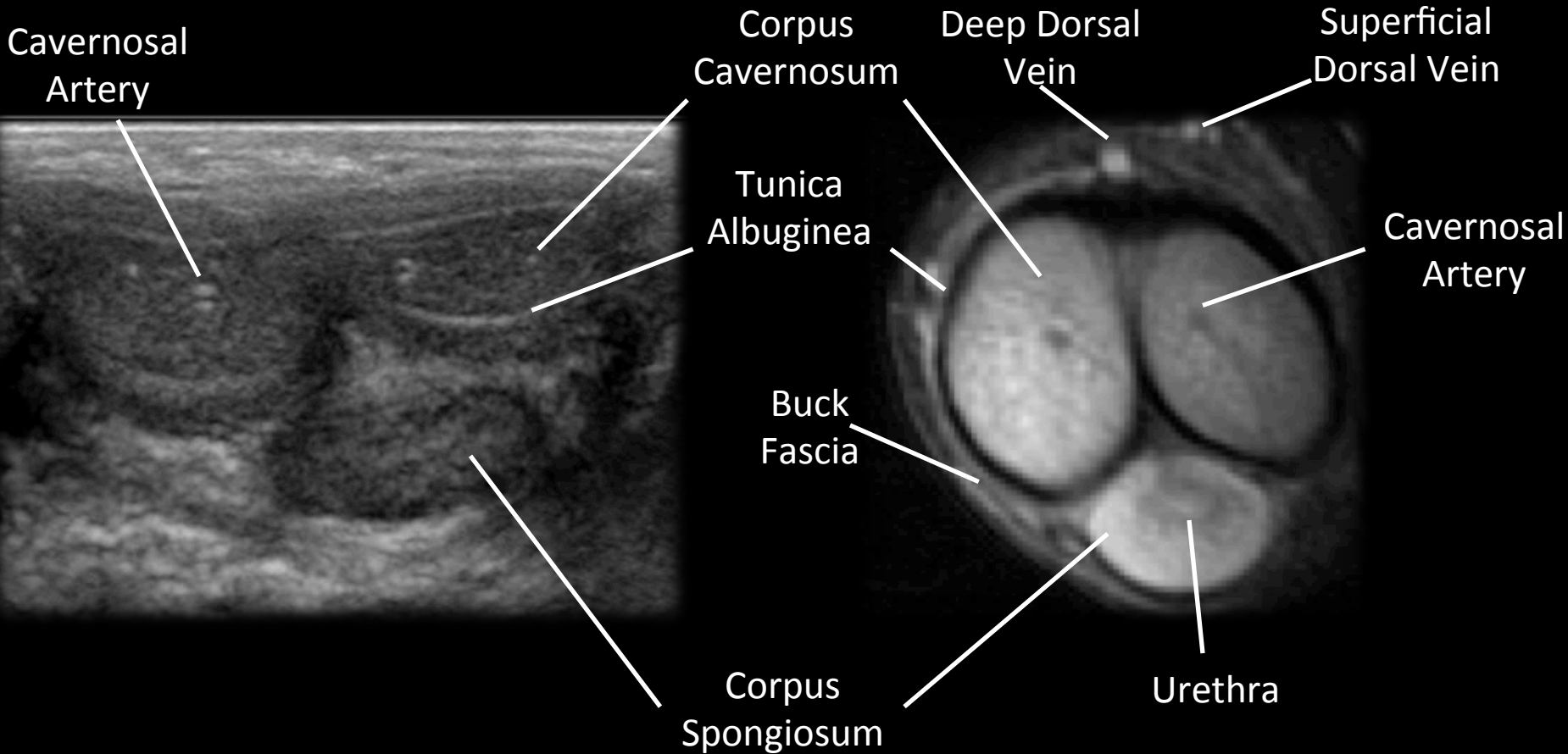


PENIS DORSAL Trans Distal

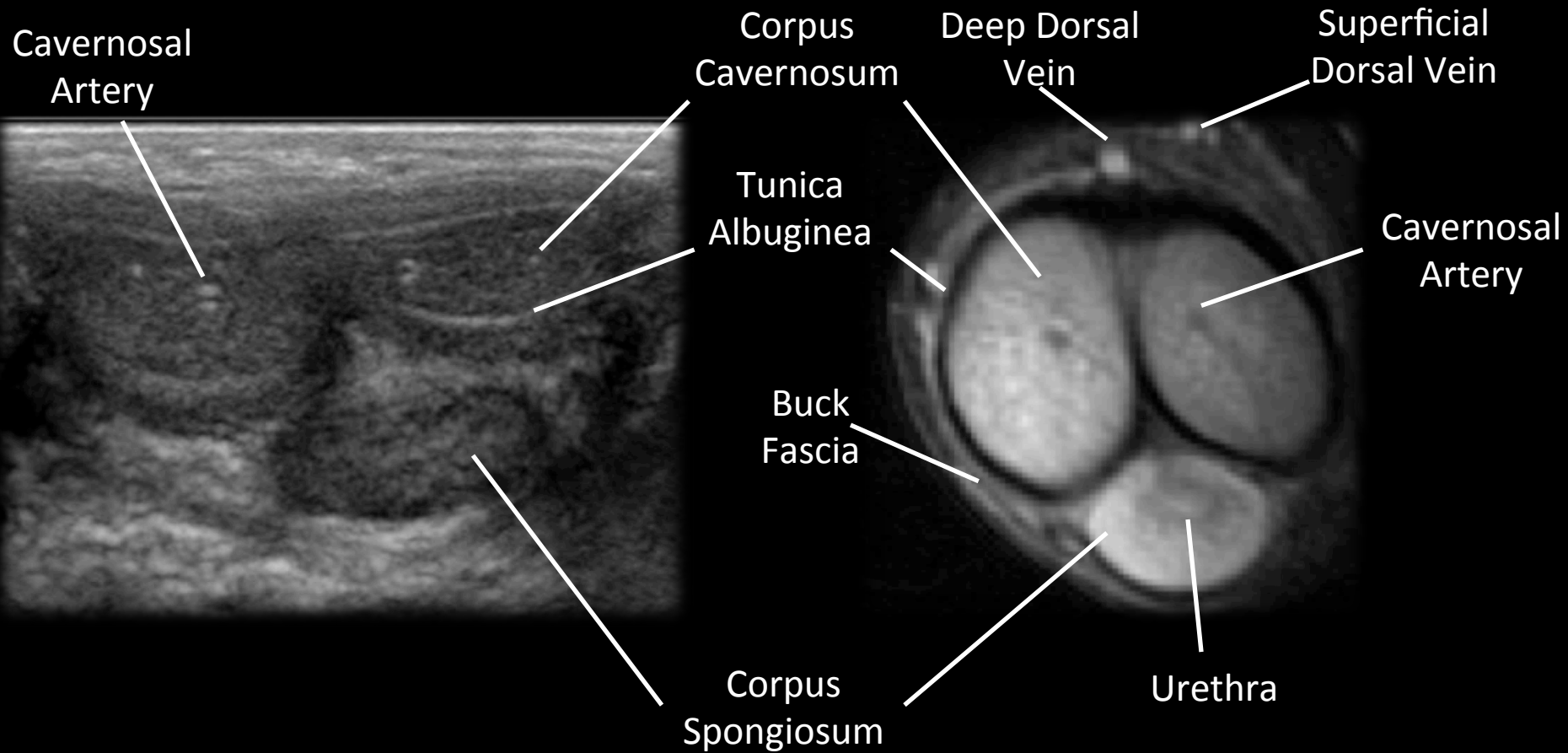


PENIS DORSAL Long Right CC

Normal Anatomy



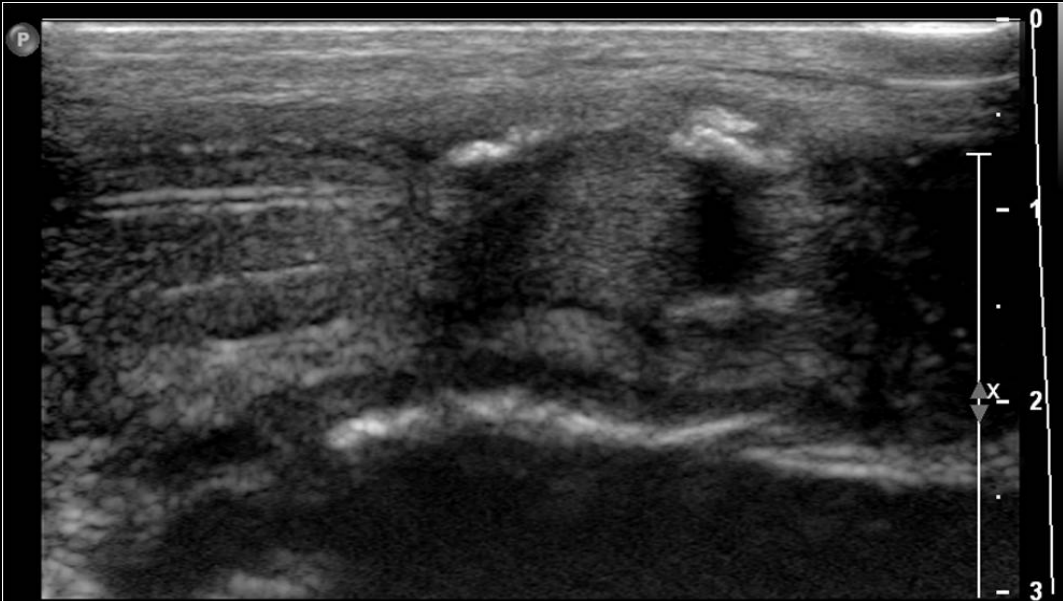
Normal Anatomy



37M with erectile dysfunction



PENIS DORSAL Trans Distal



PENIS DORSAL Long Right CC

Peyronie Disease

Clinical

- **Acquired cause of erectile dysfunction and penile curvature**
- **Palpable plaque in the tunica albuginea and corpus cavernosum¹**
- **Prevalence of 3%²**

1. Hauck EW, Hackstein N, Vosshenrich R, et al. Diagnostic value of magnetic resonance imaging in Peyronie's disease: a comparison both with palpation and ultrasound in the evaluation of plaque formation. *Eur Urol* 2003;43(3):293–300.

2. Schwarzer U, Sommer F, Klotz T, Braun M, Reifenrath B, Engelmann U. The prevalence of Peyronie's disease: results of a large survey. *BJU Int* 2001;88 (7):727–730.

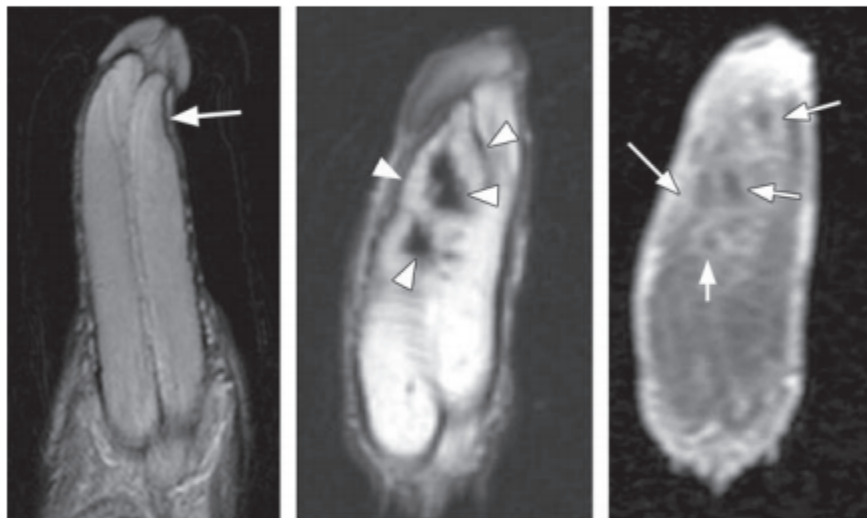
Clinical

- **Acute phase (12-18 months)**
 - **Pain and flaccidity during intercourse**
- **Chronic phase**
 - **Penile deformity (angulation and shortening)**
- **Surgery typically delayed until acute phase is over**

Imaging

- **MR**
 - **Used for accurate depiction of deformity, tunical thickness, plaque position, and cavernosal diameter³**
 - **Low signal on T1- and T2-WI**
- **US**
 - **Able to detect calcified plaques**

Imaging



a. **b.** **c.**
Figure 12. (a) Peyronie disease in a 33-year-old man. Coronal T2-weighted MR image obtained after the intracavernosal injection of prostaglandin E₁ shows a peripheral plaque in the distal left corpus cavernosum (arrow) causing a visible deformity. There is no significant enhancement after contrast material administration. (b, c) Peyronie disease in a 32-year-old man. (b) Coronal T2-weighted MR image obtained after the intracavernosal injection of prostaglandin E₁ shows extensive plaque in the distal corpora cavernosa (arrowheads). (c) Gadolinium-enhanced gradient-echo MR image shows patchy, mild peripheral enhancement (arrows), most prominent in the peripheral plaque on the left side of the image.

References

- **Hauck EW, Hackstein N, Vossheirich R, et al. Diagnostic value of magnetic resonance imaging in Peyronie's disease: a comparison both with palpation and ultrasound in the evaluation of plaque formation. *Eur Urol.* 2003;43(3):293–300**
- **Schwarzer U, Sommer F, Klotz T, Braun M, Reifenrath B, Engelmann U. The prevalence of Peyronie's disease: results of a large survey. *BJU Int.* 2001;88 (7):727–730**
- **Kirkham AP, Illing RO, Minhas S. MR imaging of non malignant penile lesions. *Radiographics.* 2008 (28):837–853**