



A Genital Problem: Infections Caused by Self-Inflicted Penile Augmentations

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Abstract

Introduction: Social pressure and dissatisfaction leads to dubious penile augmentation with paraffin, Vaseline, silicone and other foreign materials. Unhygienic conditions cease in painful infections and long-lasting medical treatment.

Aim: Aim of this study was to identify the epidemiology and morbidity throughout the Austrian population and to present the cases treated at our department.

Methods: The incidence was evaluated from 2001 till 2019 of the Austrian provinces by the Austrian Registry and distributed by age for these years. A retrospective analysis of patients treated at our department was performed to detect penile infections caused by foreign materials.

Results: From 2001 till 2019 an overall of 502 male patients were discharged in Austria with a mean value of 27. The incidence rate by age rises from the age group 20 to 29 (n=42) and reaches a peak in the age group 60 to 69 (n=92) and then flattens out again continuously. Three men aged between 20 and 34 years old were presented at our department in 2014. All presented deformed, painful, swollen symptoms of the penis. The overlaying skin was intact and no perforation of the deep fascia was detected.

Conclusion: Self-experimental penile augmentation persists to be a consistent trend in Austria. We observed the formation of granulomas and local abscesses which, if expanded, can lead to disseminating lymphogranulomas and a rupture of the erectile tissue, which can result in life-threatening conditions.

Keywords: Penis; Infection; Incidence; Augmentation; Granuloma

Introduction

Throughout socio-cultural history masculinity appears to be defined by strength and power, which appears to be directly correlated to the penis size [1]. Objects are often referred to an erected penis as a phallic symbol, which implicates fertility and potency. In sociological terms of western countries manhood is associated with proudness, restricted emotions, strength and a brutish nature of man. These associations are transmitted from one to another leading to a great social pressure. Nowadays, expectations seem to rise due to overwhelming twenty-four hours social media transmission consequently leading to dissatisfaction and low self-esteem. An US American study revealed that 27% of men are unsatisfied with their penis length [2]. To meet the mores of society dubious penile augmentation is performed by using paraffin, Vaseline, silicone and other foreign materials [1,3-8]. Interestingly these substances are used since decades. A Viennese medical doctor, Robert Gersuny, invented in 1903 the paraffin and Vaseline injection for replacing lost subcutaneous tissue especially for treating facial wrinkles [9-11]. First outcomes fulfilled his expectations. He extended this treatment to breast augmentation. Some cases developed serious complications such as lipogranuloma, which also happened to appear years after [12,13]. Although these risks of using Vaseline and paraffin are well none, it was still performed throughout the population. Bradley et al. reported in 1951 one of the first cases of self-injected paraffin into the penis leading to serious infections [14]. Over the last years several authors showed that self-attempted injections of foreign materials cause granuloma resulting in dissemination, sepsis and might also cause death [6,12]. An incessantly trend although complications are likely to occur since untrained and non-medical staff or even the patient himself implements this non-certified method. Consequences and treatment options are well-described [8,15-18] but data of prevalence in our society do not exist. Our aim of this study was to identify the epidemiology and morbidity throughout the Austrian population and to analyse the cases treated at our department.

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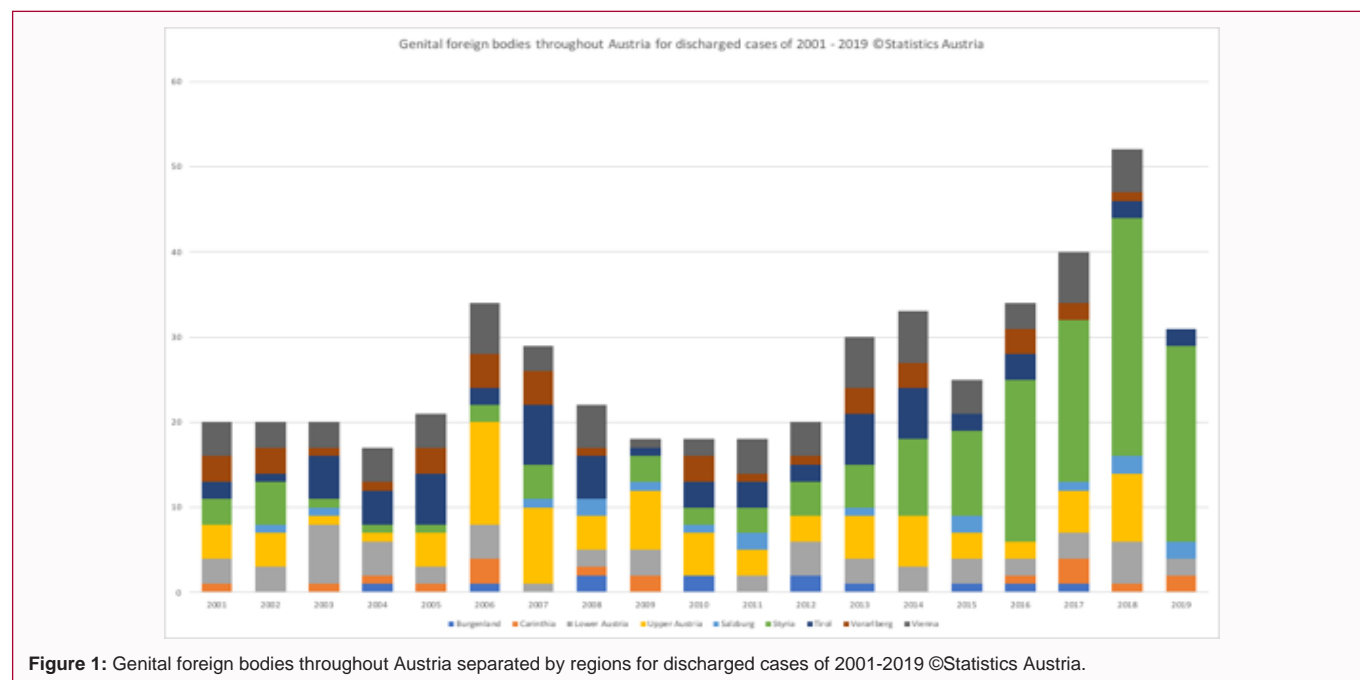
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Methods

The incidence of foreign materials was evaluated in male patients of the Austrian Registry from 2001 till 2019. Then detailed incidences allocated to the respective provinces were screened of the Austrian Registry and distributed by age. Further we performed a retrospective analysis of patients treated at our department to detect penile infections caused by foreign materials. Inclusion criteria were male patients aged 20 to 99 with penile infections caused by foreign bodies. We excluded all male patients who had penile infections due to other etiology, were under the age of 20 and only if foreign bodies were injected into the penis. Patients with penile infections but incomplete data or photo material were excluded as well.

Results

From 2001 till 2019 an overall of 502 male patients were discharged in Austria diagnosed with an infection caused by foreign materials, aged from 20 to 94 years. That implies that throw-out the Austrian population a mean of 27 ± 9 patients per year (mean \pm standard deviation) were admitted due to complications after penile infections. 2004 and 2010 presented the lowest incidence with 16 patients per year and 2018 the highest with 53 patients per year (Figure 1). The incidence rate by age throughout the Austrian population rises steadily from the age group 20 to 29 ($n=42$) and reaches a peak in the age group 60 to 69 ($n=92$) and then flattens out again continuously (Table 1). Furthermore, we retrospectively analyzed patients admitted to our department. We detected 19 men aged between 20 years old and 73 years old from 2001 to 2019. We only included 3 patients admitted in the year of 2014 since data and/or photo materials and source of infection of other patients were incomplete or rather did not meet inclusion criteria and hence were unsuitable for our analyses. Focusing on 2014 we found in sum 33 male patients who were discharged in Austria. Out of 33 patients, 9 were detected in Styria, 6 in Upper Austria, 6 in Tyrol as well as in Vienna, 3 in Vorarlberg as well as in Lower Austria, and 0 in Salzburg, Carinthia and Burgenland. The highest incidences were shown in Styria in 2014 with 26.47% whereas Salzburg, Carinthia and

Burgenland had no incidence.

The foreign materials injected in our three patients were paraffin, Vaseline and silicone. The patients presented at outpatient care 6 to 12 months after self-inflicting foreign materials. All three patients presented deformed and painful symptoms of the penis. The pain was, according to Visual Analogue Scale (VAS), ranging from 6 to 9. Patients reported difficulties in urinating due to severe pain and suffered from erectile dysfunction. The overlaying skin was intact and the deep fascia showed no perforation. Patient one cured by completely excising the foreign substance, antibiotic therapy and outpatient care for another 3 months. Patient two received the same treatment but outpatient care was prolonged for 6 months due to developing postoperative skin necrosis (Figure 2). Patient three refused surgical treatment (Figure 3).

Discussion

“Self-injection of foreign materials may augment the penis to raise one’s potency and finally satisfying the sexual partner” - A disappointing desire resulting in a painful ending.

A questionnaire of 1905 Hungarian prisoners revealed a 15.7% usage of Vaseline whereas 25.4% of cases developed complications. Prisoners were motivated by inmates’ recommendation, which point out that self-infliction of foreign bodies is a trend among men [3]. Moon et al. equal findings report a 91% dissatisfaction of the penis giving foreign bodies a trial by acquaintances recommendation [19]. Patients expressed a significantly worse satisfaction of their sexual life after augmentation due to a painful penis in erectile state [3,5]. All the patients had risky social behavior being for example prisoners or beggars and showed a higher incidence in being of Asian or Eastern European origin [20-23]. This correlates to our patients having immigrant backgrounds. Though, we could not identify higher exposed risks of the population living next to the borders of Eastern Countries (2014: Eastern Austrian States $n=4$, Western Austrian States $n=4, 5$).

Complications happen to occur because of the inability to

Table 1: Distribution of genital foreign bodies' infection by age of discharged cases from 2001-20019 in Austria ©Statistics Austria.

Year/Age	20 to 29	30 to 39	40 to 49	50 to 59	60 to 69	70 to 79	80 to 89	90 to 99
2001	2	3	-	8	-	3	2	-
2002	1	3	6	2	5	3	-	-
2003	1	7	3	1	2	4	1	1
2004	1	3	6	2	2	1	1	-
2005	1	1	6	6	2	4	2	-
2006	2	6	6	6	7	5	1	-
2007	5	3	3	5	8	2	4	-
2008	2	3	1	3	3	1	7	-
2009	2	3	2	5	3	2	3	-
2010	-	1	2	3	2	8	-	-
2011	2	3	5	2	2	4	2	-
2012	2	4	1	3	3	3	2	-
2013	5	1	-	10	6	3	5	1
2014	2	3	6	7	5	7	4	-
2015	3	3	3	2	5	5	3	-
2016	4	2	10	2	7	8	1	-
2017	3	5	5	4	8	10	5	-
2018	4	7	6	7	12	9	6	2
2019	-	1	4	5	10	5	7	1
Sum	42	62	75	83	92	87	56	5



Figure 2: Pat.1, First Admission 11 months after injection; Diagnosis: Lipogranuloma of the penis; First line therapy: Debridement of the penis and primary wound closure.



Figure 3: Pat.2, First Admission 13 months after injection.

metabolize foreign bodies [24]. The extent of symptoms depends on the amount and replications and the hygienic surroundings [5,6,12,14,20,21,25]. Nevertheless, first symptoms appear at least a year after procedure [6,26]. Our patients showed painful swellings, deformity of the penis shaft, and skin necrosis and presented themselves 6 to 12 months after self-inflicting foreign material. Rollins et al highlighted the dangerousness when lipogranuloma of the penis resulted in acute pulmonary edema and ended in sudden unexpected death [27].

Data of Statistics Austria revealed that a mean of 27 male patients are discharged yearly. Based on a mean male Austrian population of 60.070 aged 20 to 35 years old, the yearly discharge would amount

0.04% of male population in 2014. Comparing this data to the Hungarian jail study, this would indicate a low incidence throughout the Austria population. Except, our data revealed the incidence of discharged patients of the inpatient care. Data on patients in the outpatient settings are missing. Still, we can demonstrate a consistent discharge of Austrian male patients treated with complications of penile foreign bodies in the years 2001 to 2019. Interestingly, the incidence occurred throughout every age group, whereas the 60 to 69 years old male patients presented the highest number, which we had not expected.

Conclusion

Self-inflicted penile augmentation persists to be also a consistent trend in the Austrian population whereas exact data of prevalence in our society do not exist due to its illegality. Granuloma formations

and local abscesses are risk bearing consequences as disseminating lymphogranuloma and cavernosal invasion may lead to life-threatening conditions [27].

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