



Penile Adhesions

What are penile adhesions?

Penile adhesions in boys occur when the penile shaft skin adheres (sticks) to the glans (head) of the penis. This can happen in both circumcised and uncircumcised boys. The adhesions can be found anywhere around the head of the penis and vary in severity.

There are 2 types of adhesions: **non-vascularized** and **vascularized**. With **non-vascularized** adhesions the foreskin is naturally adherent to the glans (head) of the penis and sometimes can happen again after circumcision. Often this type of adhesion is resolved without treatment from natural exfoliation of the skin. **Vascularized** adhesions are due to scar tissue formation from an earlier procedure and will require intervention to separate the skin bridge.

What causes penile adhesions?

Adhesions may develop due to an excess of residual foreskin following a circumcision, or when the foreskin is unable to be retracted in uncircumcised boys. Adhesions can also form as an infant develops more fat in his pubic area causing the penis to be buried. The skin of the shaft penis can then adhere to the glans. Small irritation or diaper rash can also lead to adhesions.

How is it diagnosed?

History of reported symptoms and physical exam by doctor. During diaper changes or bath time you may notice the adhesions, or they may be noted at a routine office visit with your son's primary care provider. Most penile adhesions cause no painful symptoms. Occasionally the area around the adhesions can become red and irritated.

How are penile adhesions treated?

Your son's provider will decide on the best treatment option for his adhesions. Treatment may include the topical steroid cream Betamethasone that will weaken the tissues and help break down the adhesions. It is important to follow your provider's instructions when using steroid cream.

Betamethasone application:

- Apply pea size amount of Betamethasone to adhesions, wait one minute and then apply Vaseline® or Aquaphor® ointment on top. Do this twice a day for 4 weeks. You may apply for another 4 weeks if needed but must take a 2-week break in between.
- Apply Aquaphor® or Vaseline® to adhesions in between Betamethasone with diaper changes or 4 times a day. Glob it on around the area.
- Expect some redness/irritation. If bothersome, stop using the Betamethasone for 1-2 days, and then resume.

When is surgery needed?

If the topical cream does not work to release the adhesions, or skin bridges are present your son's physician or practitioner may recommend a short procedure to separate the adhesions. Even with surgical correction, non-vascularized adhesions can recur. The risk of recurrence can be decreased by gently retracting the skin over the head of the penis and applying a liberal amount of ointment with diaper changes or 4 times a day.

What happens during surgery?

Your son will receive general anesthesia to help them sleep and not feel pain during surgery. A local block (numbing medicine around the surgical area) will be given. The skin bridge is clamped and divided. Dissolvable stitches or surgical glue may be used, and a dressing placed. A circumcision revision may also be needed.

Will my child be in pain?

Most children do well with the surgery. Pain can be controlled by alternating Acetaminophen (Tylenol or another brand) and Ibuprofen. Do not give aspirin because it may cause bleeding.

What can I expect after the surgery?

Expect swelling, redness, and possible bruising at the head of the penis. Minor bleeding or spotting at incisions is not unusual.

Before your son is discharged you will be given written information about his care at home and any questions you have will be answered.

- **Diet:** Resume regular diet as tolerated.
- **Activity:** May return to school or daycare when pain is well controlled. Avoid straddling activities, contact sports and swimming for 14 days, follow your surgeon's specific instructions.
- **Wound care:** If your son has a dressing on his penis, follow your surgeon's specific instructions for removal. Apply Aquaphor® or Vaseline® with diaper changes or 4 times a day. Glob it on around the area.
- **Bathing:** Ok to take a bath 24 hours after procedure. Bathe (5-10 minutes) in plain water for the next week. A warm bath daily will help with healing and provide comfort.
- **Medicines:** Pain can be controlled by alternating Acetaminophen (Tylenol® or another brand) and Ibuprofen®. Do not give aspirin because it may cause bleeding.

What to call the doctor for:

- Fever associated with redness or drainage at surgical area.
- Significant swelling, bruising, or bleeding at surgical area.
- Wound separation

We ask that you call your child's primary care provider for other concerns.

Follow-up care:

Follow-up with your child's surgeon as directed following surgery. Call your surgeon's office at (612) 813-8000 option #3 to schedule an appointment.

Questions?

This information is not specific to your child but provides general information.

If you have any concerns or further questions, please send a message via the portal or call the clinic at (612)813-8000 option #6 for the Nurse message line.

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