

XXVII Congresso Macroregionale SIA
Sezione Lombardo-Piemontese-Valdostana
Sabato 18 aprile 2015
Tenuta Fontanafredda – Serralunga d'Alba

PROBLEMATICHE EMERGENTI

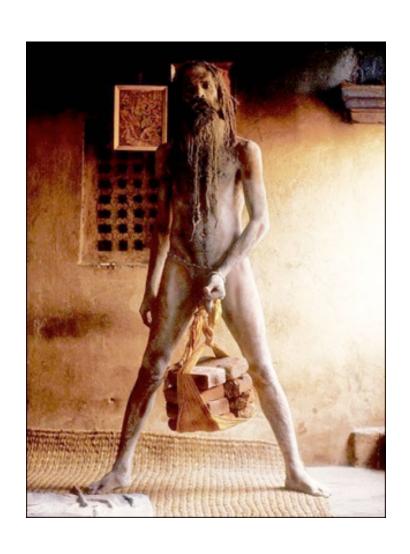
CHIRURGIA ESTETICA DEI GENITALI MASCHILI ...meno disagi o più disfunzioni?

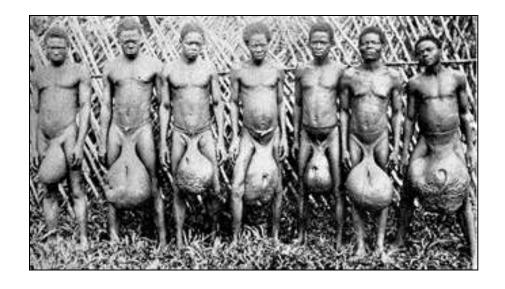
Francesco Varvello *MD*, *FEBU*, *FECSM* Enrico Conti *MD*, *FECSM*



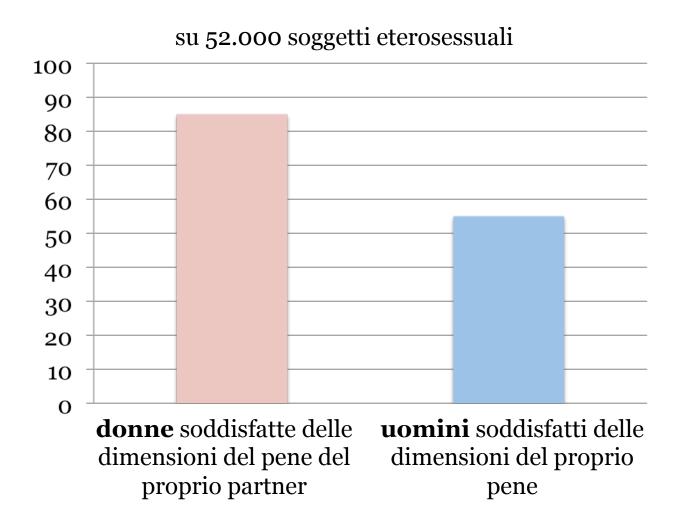
S.C. Urologia Ospedale "San Lazzaro" Alba

IL MITO





SONDAGGIO WEB



Lever et al, Psychology of Men and Masculinity 2006; 7 (3): 129-43.

Penile Cosmetic Surgery Center

858-224-3537

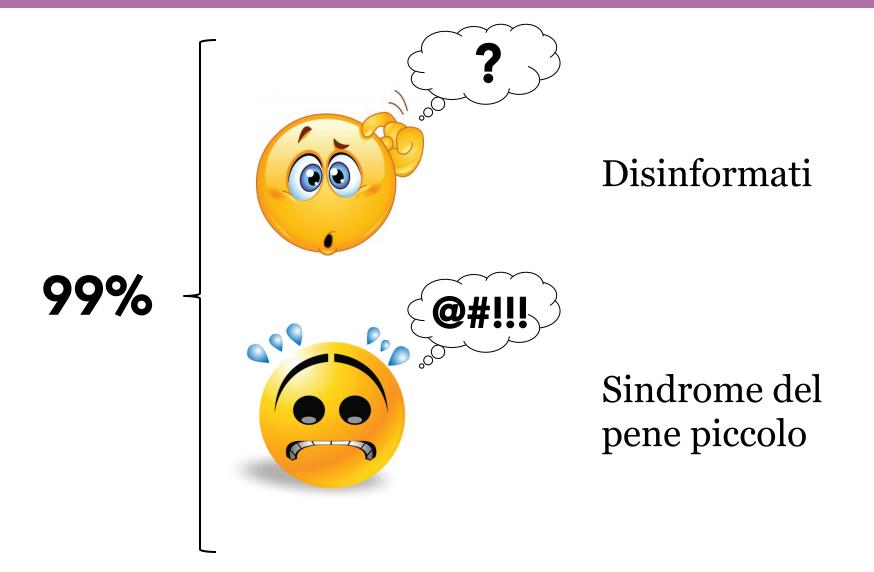


Procedures Reasons for Phalloplasty Resources Phalloplasty Cost and Financing Penile Lengthening Surgery Penile Girth Enhancement Surgery Weld urgery Center Penile Glanular Enhancement Surgery Velcome to the Penile Cosmetic Surgery Center Penile Dual Augmentation™ Surgery pecializing in penis enlargement surgeries, Penile Triple Augmentation™ Surgery ncluding permanent penis lengthening surgery, enis widening surgery, and penis head **Erectile Dysfunction** nlargement surgery. Reconstruction of Penile Enlargement Surgeries The Penile Cosmetic Surgery Center is led by Dr. rakovsky, a world-renowned plastic surgeon, AlloDerm® osmetic surgeon. Dr. Krakovsky holds a patent or penile triple augmentation surgery, the most **Dermal Grafts** opular phalloplasty surgery technique used by BellaDerm® nany phalloplasty surgeons today. Liposuction listorically, penis widening (phalloplasty) ncluded free fat transfer (FFT), metametilcrilate Circumcision MMPA), silicone, and even oil injections. In ecent years, liquid silicone has been replaced by Scrotal Web Resection ilicone implants for penis widening augmentation (phalloplasty). All of these techniques are associated with high complication rates and are still considered experimental. Phalloplasty surgery includes free fat transfer

CHI SI LAMENTA DELLE DIMENSIONI?

	N	Normali	Non normali
Ghanem et al	250	246	4
Shamloul	92	92	0
Spyropoulos et al	28	28	0
Mondaini et al	44	44	0
TOTALE	414	410	4

CHI RICHIEDE L'INTERVENTO?



MICROPENE

PENE CORTO PENE NASCOSTO







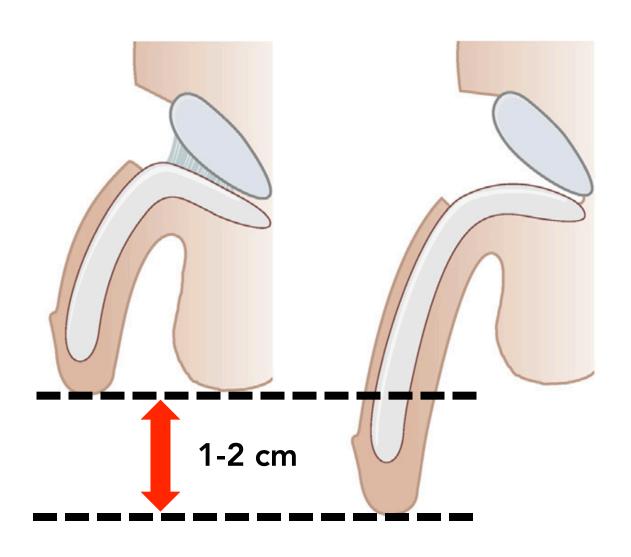




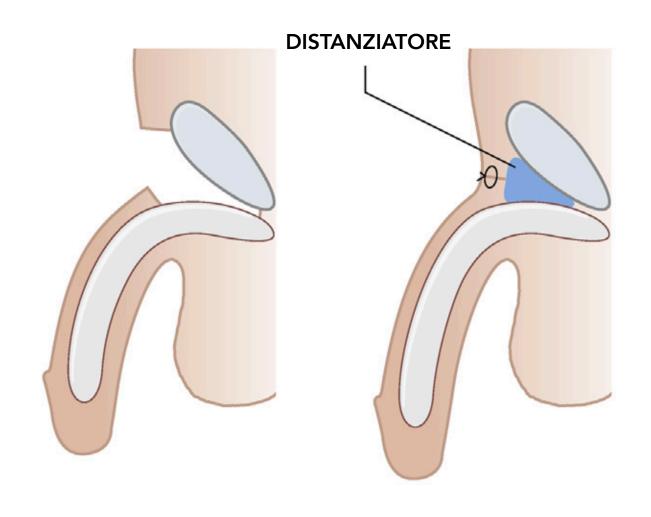


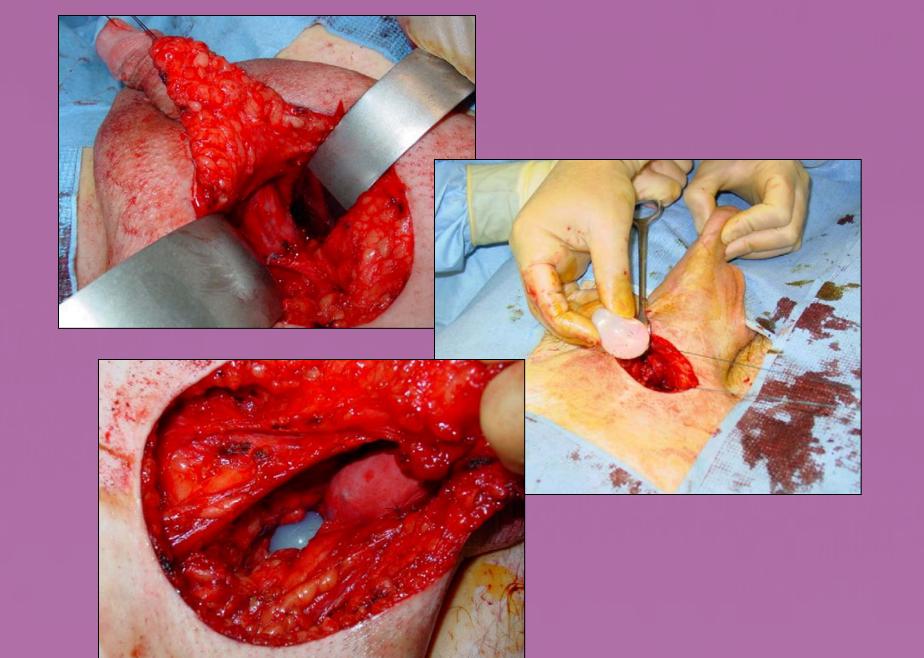
Un centimetro nel pene di un uomo è come un chilometro nella sua testa $Dr.\,Marc\,Abecassis$

SEZIONE DEL LEGAMENTO SOSPENSORE

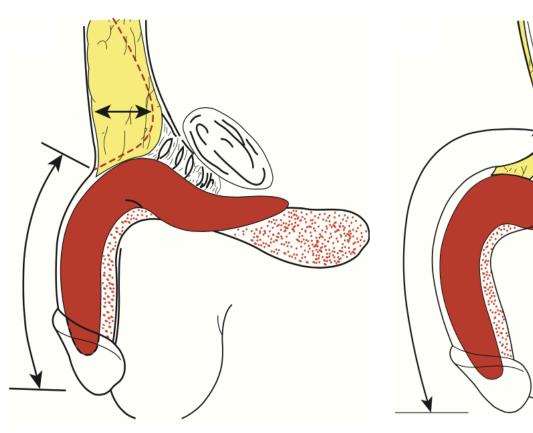


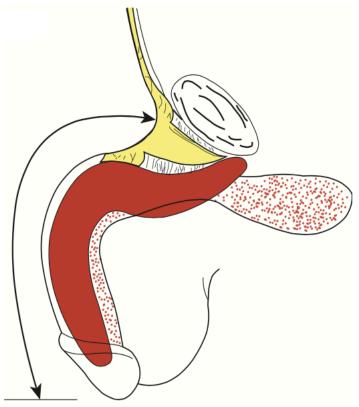
DISTANZIATORE IN SILICONE



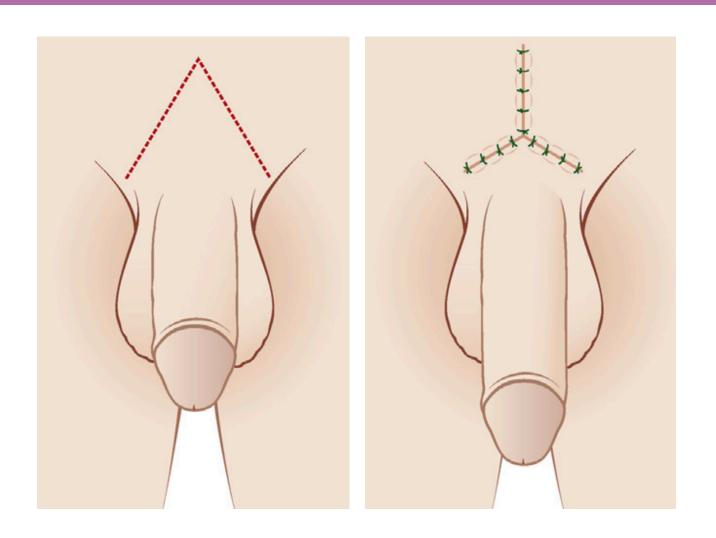


INTERPOSIZIONE DI TESSUTO ADIPOSO PREPUBICO





PLASTICA INVERTITA V-Y



Long et al, Zhonghua Zheng Xing ShaoShang Wai Ke Za Zhi 1990; 6: 17–9.

SEZIONE DEL LEGAMENTO SOSPENSORE

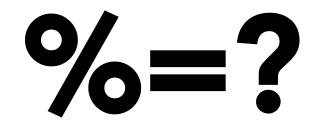
Aumenta la lunghezza percepita del pene in stato di flaccidità

Riduce l'angolazione del pene in stato di erezione

EFFETTI INDESIDERATI

Accorciamento del pene

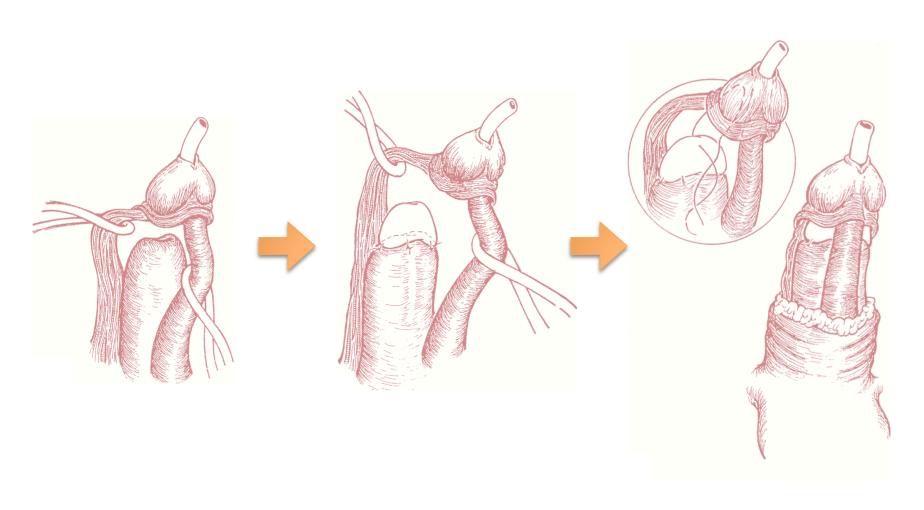
Instabilità dell'asta



"Scrotalizzazione" del pene

Possibile lesione del fascio vasculo-nervoso dorsale

PENILE DISASSEMBLY CON INNESTO DI CARTILAGINE AUTOLOGA



Perovic et al, Br J Urol 2000; 86: 1028-33



INIEZIONE DI MATERIALI SINTETICI

FAI DA TE

Olio minerale

Silicone industriale

Mercurio

Paraffina

Gelatina di petrolio

Vaselina

Olio di fegato di merluzzo

Inserimento di corpi estranei

MEDICO

LIS (Liquid Injected Silicone)

Ac. ialuronico (glande)

INIEZIONE DI MATERIALI SINTETICI

COMPLICANZE

Edema persistente

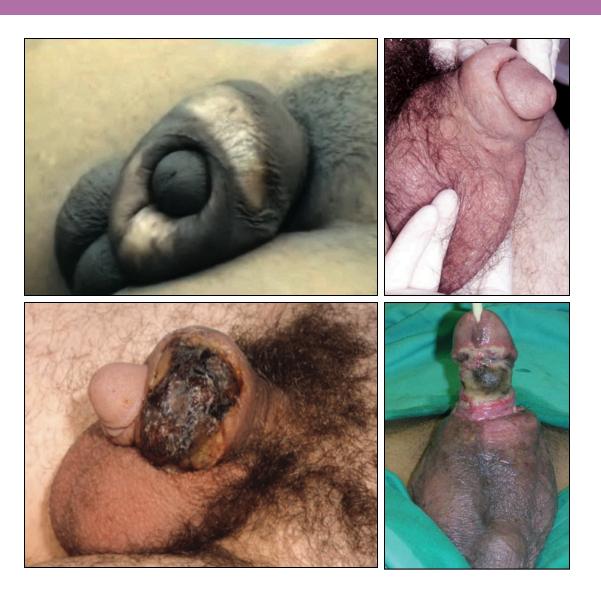
Migrazione

Inestetismi/deformità

Reazioni granulomatose

Necrosi cutanea

Lesioni vascolari e nervose





penile girth augmentation silicone DOI: 10.1111/j.1745-7262.2007.00262.x



·Clinical Experience

Short-term results of incremental penile girth enhancement using liquid injectable silicone: words of praise for a change

Yacov Yacobi^{1,2}, Alexander Tsivian¹, Roman Grinberg², Oded Kessler¹



Abstract

Aim: To report our experience with penile girth augm August 2003 and July 2006, 324 men (mean age 35 y subcutaneous injections between the penile skin and t penile shaft, under local anesthesia. Digital photograp measurements (n = 30) yielded objective results. Subj of satisfaction. Follow-up averaged 20 months (rang procedures were primary augmentations. Most men (and 93% were circumcised. The mean measured penil 12.1 cm (10.3–15.3 cm) post-treatment (mean increas and partner satisfaction was already expressed after the 8 h. Complications (mild bruising) were easily resolve able silicone yields very satisfactory short-term result Androl 2007 May; 9: 408–413)

Keywords: injectable silicone; penile girth; augmentation; penile

ond treatment. The patients reported that they could return to normal sexual activity 8 h after the procedure without untoward sequelae. None of the patients reported any pain after the effect of the anesthetic wore off. There were no complications during this short-term follow-up, with the exception of slight bruising after injection which quickly resolved. There were no serious complications whatsoever.

¹Department of Urologic Surgery, E. Wolfson Medical Center, Holon 58100, Israel ²Theomim Clinic, Ramat-Gan 52511, Israel

INIEZIONE DI ADIPOCITI AUTOLOGHI













INIEZIONE DI ADIPOCITI AUTOLOGHI

Riassorbimento 30-70%!!!



COMPLICANZE

Proporzionali alla quantità di adipociti iniettati

Asimmmetria/deformità

Formazione di noduli

Lipogranulomi

Inadeguata rigidità



DERMAL FAT GRAFT



DERMAL FAT GRAFT

Tempi chirurgici

Edema persistente

Congestione venosa

Riassorbimento - fibrosi

Lesioni cutanee

Sproporzione asta-glande

Asimmetria/curvatura dell'asta

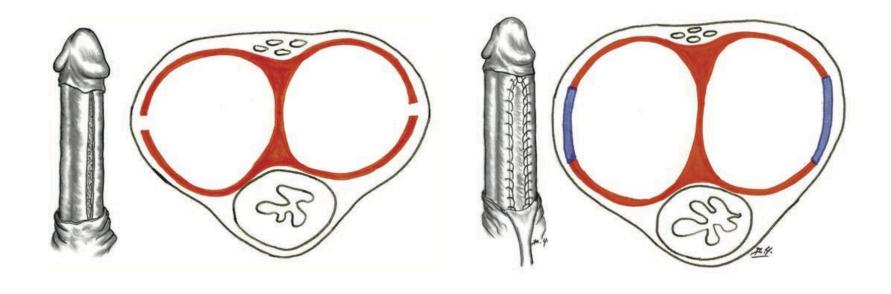
Accorciamento

Cicatrice sito di prelievo





CORPOROPLASTICA LONGITUDINALE CON PATCH DI VENA SAFENA





Contact

Sexual Medicine Society of North America, Inc.

Amer										
HOME	ABOUT	NEWS	MEETINGS	MEMBERSHIP	GRANTS	FELLOWSHIP	RESOURCES	CONTACT	Search Keywords	a
You are he	ere: Home » A	About » Posi	ition Statement	5						
MAIN M	IENU		F	POSITION STATEM	MENTS					
Home		F	PENILE LENGTHENING AND GIRTH ENHANCEMENT SURGERY							
About Board of Directors			The Society for the Study of Impotence has found no peer-reviewed, objective or independently- monitored studies, or other data, which prove the safety or efficacy of penile lengthening and girth enhancement surgery.							
Committees Bylaws			The Society believes that, in men who do not have congenital anatomical anomalies of the penis, the safety and efficacy of penile lengthening and girth enhancement surgery have not been established.							
Positio	on Statement	S	Т	herefore, penile lengt	thening and gi	irth enhancement s	urgery can only be	e regarded as <mark>experi</mark> r	mental surgery.	
News		Т	The Society is aware of complications and adverse outcomes which should be clearly disclosed to patients considering such surgery.							
Meetings			The Society believes that those government agencies charged with the regulation of medical practice and the enforcement of laws prohibiting false or unsubstantiated advertising claims should give careful attention to claims made with regard to these surgical procedures.							
Membersh	hip			inst or unsussummer	<u> </u>	ciamis silvata give		o ciamo made man	ogara to triese sargical processiones	
Grants										
Fellowship	0									
Resources	5									





ABOUT US

EDUCATION

Association

RESEARCH

CH ADVOCACY

INTERNATIONAL

PRACTICE RESOURCES

ABOUT US > AUA Governance > AUA Policies > Policy Statements > Penile Augmentation Surgery

Policy Statements



PENILE AUGMENTATION SURGERY

The American Urological Association (AUA) and the Urology Care Foundation consider subcutaneous fat injection for increasing penile girth to be a procedure which has not been shown to be safe or efficacious.

The AUA also considers the <u>division</u> of the suspensory ligament of the penis for increasing penile length in adults to be a procedure which has not been shown to be safe or efficacious.

Board of Directors, January 1994
Board of Directors, January 1995 (Reaffirmed)
Board of Directors, September 1995 (Revised)
Board of Directors, January 2001 (Reaffirmed)
Board of Directors, February 2006 (Reaffirmed)
Board of Directors, October 2008 (Revised)

Board of Directors, October 2013 (Reaffirmed)







Journal of Urology
Guidelines
Annual Meeting 2015
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Position Paper: Management of Men Complaining of a Small Penis Despite an Actually Normal Size

Hussein Ghanem, MD,* Sidney Glina, MD,† Pierre Assalian, MD,‡ and Jacques Buvat, MD§

*Department of Andrology, Sexology & STDs, Cairo University, Faculty of Medicine, Cairo, Egypt; †Instituto H. Ellis and Department of Urology, Hospital Ipiranga São Paulo, Brazil; †Department of Psychiatry, McGill University, Director Human Sexuality Unit: Montreal General Hospital, Montreal, Canada; *Centre ETPARP, Lille, France

DOI: 10.1111/j.1743-6109.2012.02725.x

ABSTRACT

Introduction. With the worldwide increase in penile augmentation procedures and claims of devices designed to elongate the penis, it becomes crucial to study the scientific basis of such procedures or devices, as well as the management of a complaint of a small penis in men with a normal penile size.

Aim. The aim of this work is to study the scientific basis of opting to penile augmentation procedures and to develop guidelines based on the best available evidence for the management of men complaining of a small penis despite an actually normal size.

Methods. We reviewed the literature and evaluated the evidence about what the normal penile size is, what patients complaining of a small penis usually suffer from, benefits vs. complications of surgery, penile stretching or traction devices, and outcome with patient education and counseling. Repeated presentation and detailed discussions within the Standard Committee of the International Society for Sexual Medicine were performed.

Main Outcome Measure. Recommendations are based on the evaluation of evidence-based medical literature, widespread standards committee discussion, public presentation, and debate.

Results. We propose a practical approach for evaluating and counseling patients complaining of a small-sized penis. **Conclusions.** Based on the current status of science, penile lengthening procedure surgery is still considered experimental and should only be limited to special circumstances within research or university institutions with supervising ethics committees. **Ghanem H, Glina S, Assalian P, and Buvat J. Position paper: Management of men complaining of a small penis despite an actually normal size. J Sex Med 2013;10:294–303.**

Key Words. Small Penis; Dysmorphophobia; Body Dysmorphic Disorder; Penile Augmentation

CONCLUSIONI

Il **desiderio** di modificare/alterare il pene con varie pratiche è **diffuso**

Chirurgia mossa da interessi commerciali

I centri privati vantano casistiche numerose ma non pubblicano i propri risultati

Risultati: non pervenuti

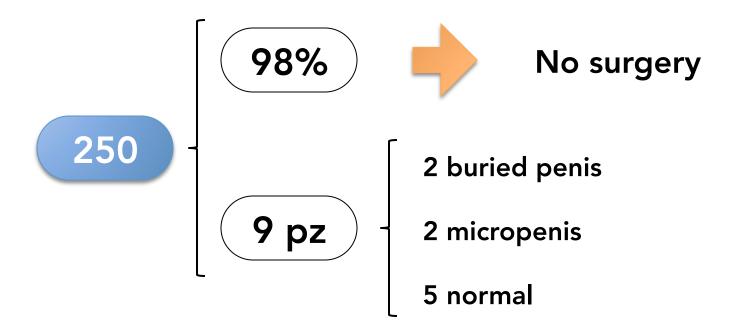
Complicanze: potenzialmente gravi



Structured Management and Counseling for Patients with a Complaint of a Small Penis

Hussein Ghanem, MD,* Rany Shamloul, MD,^{†,‡} Fathy Khodeir, MD,[§] Hany ElShafie, MD,[‡] Amr Kaddah, MD,[‡] and Ihab Ismail, MD[‡]

*Cairo University—Andrology, Cairo, Egypt; †Cairo University—Andrology, Sexology and STDs, Cairo, Egypt; †Queen's University—Pharmacology, Ontario, Canada; §Cairo University—Surgery, Cairo, Egypt



RUOLO DELLE SOCIETA' SCIENTIFICHE





