



GLICKMAN UROLOGICAL & KIDNEY INSTITUTE

Peyronie's Disease

What is it?

Peyronie's disease is the presence of scar tissue (plaque) in the penis that causes curved or otherwise deformed erections. This condition frequently interferes with sexual intercourse.

What causes it?

Peyronie's disease is generally the result of an injury or repeated injuries to the penis. Most cases are diagnosed between ages 40 and 70. This is a time in a man's life where erection rigidity is not as strong as when he was younger. The erection may still be sufficient for vaginal penetration, but the penis may be subjected to too much bending during intercourse, leading to tearing of the elastic fibers of the erection chambers inside the penis. The injuries don't always cause pain when they occur. Healing takes place spontaneously with the formation of scar tissues (plaque). This scar tissue results in shortening of the erection and curvature or other deformity. As many as 9 percent of middle-aged and older men have Peyronie's disease.

What are the symptoms?

Symptoms can develop slowly or appear overnight. Peyronie's disease often presents in two stages:

- The acute phase lasts six to 18 months as plaque forms in the penis. Scar tissue can be felt beneath the skin of the penis as flat lumps or a band of hard tissue. Bending/curving becomes worse and pain may accompany an erection. In some cases the erect penis might have narrowing, indentations or an hourglass appearance.
- The chronic phase signals the end of plaque growth. The pain experienced during the acute phase typically ends. In most men, pain during erections improves within one to two years, but the plaque and curvature often remain.

Complications of Peyronie's disease may include:

- Inability to have sexual intercourse
- Erectile dysfunction (ED)
- Anxiety about sexual ability or appearance of the penis
- Relationship stress
- Difficulties fathering a child because intercourse is difficult or impossible

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How is Peyronie's disease diagnosed?

Your doctor will ask you about any injuries prior to your symptoms appearing, and about your ability to have and maintain an erection, as well as its rigidity. You will undergo a physical exam to look for the presence of hardened tissue in your penis.

How is it treated?

Pain with erection, if present, will resolve as you heal. However, deformity of your erection or erectile dysfunction may make sexual intercourse difficult or impossible. Treatment is meant to improve your ability to have intercourse.

Non-surgical treatments

- Your doctor may recommend lifestyle changes to reduce the risk of ED associated with Peyronie's disease, including quitting smoking, reducing alcohol consumption, exercising regularly and avoiding illegal drugs.
- Some oral medications that have been recommended for Peyronie's disease have included vitamin E, potassium para-aminobenzoate (Potaba), tamoxifen, colchicine, carnitine and pentoxifylline, but doctors now regard these as ineffective.
- Penile injections to break up plaque include verapamil, interferon, steroids and collagenase (Xiaflex®)—the only medication specifically approved for Peyronie's disease.
- Medical therapies to break up scar tissue and decrease curvature, such as high-intensity ultrasound, radiation therapy or iontophoresis—a weak electric current that delivers medications through the skin—are no longer considered effective. Researchers are investigating low-energy shockwave therapy as a possible treatment for Peyronie's disease.

Surgery

Your doctor may recommend surgery if you have a severe, long-term case where symptoms do not improve and the bend in your penis or poor erections interfere with sexual intercourse. Surgical options include:

- Grafting removes plaque and replaces it with a patch of skin, a vein or other material to straighten or restore lost length. Numbness and ED are potential complications.
- Plication removes or pinches a piece of tissue from the side of the penis opposite the plaque to straighten the penis. While less likely to cause numbness or ED, it cannot restore length or girth to the penis.
- Implantation of a penile prosthesis is an option for men with both Peyronie's disease and ED. The implant usually straightens the penis: if it does not, it can be combined with one of the other surgical options.

Most medical experts suggest waiting one year or more from when symptoms appear before having surgery, to make sure the condition is stable.

To learn more, visit clevelandclinic.org/urology.

To schedule an appointment, call the Glickman Urological & Kidney Institute appointment line at [216.444.5600](tel:216.444.5600) or [800.223.2273](tel:800.223.2273), extension [45600](tel:45600).