

Case 119 An ulcerated prepuce



Figure 119.1

This 85-year-old retired labourer presented with a foul-smelling and ulcerated lesion of the penis, which had been getting progressively worse over the past year. He noticed blood-staining of his underpants. He had been treating the lesion with various proprietary ointments. On examination, the prepuce could only be retracted as far as can be seen in Fig. 119.1. The ulcer felt hard; it involved the glans itself, as well as the inner aspect of the prepuce.

What is the obvious clinical diagnosis, and what will be its likely histological appearance?

This is an ulcerating tumour of the penis. The vast majority of these are stratified squamous cell carcinomas.

How does this tumour spread?

- *Local:* The tumour may fungate through the prepuce and may spread along the shaft of the penis to destroy its

substance. Surprisingly, it rarely occludes the urethra, so retention of urine does not occur.

- *Lymphatic:* To the inguinal lymph nodes on either side.
- *Blood-borne:* Spread to the lungs is late and is unusual.

In what group of men is this disease rarely seen?

It is virtually unknown in Jews, who are circumcised soon after birth. This eliminates the presence of retained smegma under the prepuce, which is the almost invariable pre-existing factor in this disease.

What is the cause of death in this disease?

Haemorrhage from the fungating involved inguinal lymph nodes.

How is this condition treated?

The diagnosis is first confirmed by biopsy. Early lesions are treated by radiotherapy, usually by implantation of iridium wires. If the urethra is invaded, as in this case, partial amputation of the penis is required, as the radiation therapy would result in a urethral stricture. Survival from early disease is good.

When the regional lymph nodes are involved but are still operable, radical amputation of the penis and bilateral block dissection of the inguinal nodes is required. Since the external urethral sphincter is preserved, the patient remains continent of urine, although he needs to micturate in the sitting position.

Inoperable fixed inguinal nodes are treated with palliative radiotherapy.