Peyronie's Disease

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n this series of articles I am going to show you some of the exhibits contained in the new BAUS Virtual Museum of the History of Urology which is part of the BAUS website (www.baus.org.uk). David Ralph elegantly defines Peyronie's disease as "a wound healing disorder that presents with a fibrous inelastic scar of the tunica albuginea that is currently believed to occur in the genetically susceptible individual following trauma to the penis". As we all know it presents with a lump in the penis which leads to a bend on erection. Mr Ralph is a 21st Century expert on Peyronie's disease but this condition has been recognised for many centuries, even before the time of François Gigot de la Peyronie himself (Figure 1).

It is generally believed and taught that François Gigot de la Peyronie (1678-1747), the famous French surgeon, was not the first to describe Peyronie's disease. Heraclius (575-641), the Byzantine Emperor, was said to have a penis that was so bent it caused him to urinate on his face. In 1267 Theodoric Borgognoni (1205-1298), a mediaeval Italian surgeon, described a condition of hard penile tubercles which caused a heaviness on erection. Gabriele Falloppio (1523-1562) describes "little acorns" which caused the erect penis to bend "like a ram's horn". Guilielmus of Saliceto (c 1210-1276), Andreas Vesalius (1514-1564) - the famous anatomist, Giulio Cesare Aranzi (1530-1589) and Nicholaus Tulp (1593-1674), star of a famous Rembrant painting, are also said to have described it. Anton Frederik Ruysch (1638-1731) is said to have been the first to publish a copperplate illustration of it in 1672. This said, the interesting article by Sergio Musitelli, Maurizio Bossi and Hussein Jallous gives a very detailed argument against all these earlier descriptions and claims Peyronie did indeed give the first true description.

For the record, François Peyronie (whose name was actually Lapeyronie, which means "little stone") described the condition in 1731 in a book on ejaculatory dysfunction. He describes "indurations" of the cavernous bodies like "rosary beads" leading to penile curvature. Lapeyronie is said to have prescribed mineral water as a treatment (some may say this was as efficacious as many other more modern remedies!). Vitamin E was first recommended by Scardino and Scott in 1949 and Potaba by Zarafonetis in 1959. In the 19th Century, mercury was injected into the plaques, perhaps because of the presumed association with venereal disease. In 1954 Teasley suggested steroid injections.

Excision of the plaque was also carried out in the 19th Century; this led to erectile dysfunction. Hugh Hampton Young suggested just releasing the plaque in 1926 and Lowsley excised the plaque and grafted in a fat pad in 1950. In 1965 Reed Nesbit described his procedure for correcting congenital curvature of the penis which was soon adopted for use in Peyronie's. Various materials have been used to fill in the gap after excising or incising the plaques. In 1998 Tom Lue described incision and grafting with harvested saphenous vein, the 'Lue procedure'. He has now replaced this almost entirely with a 16 dot plication technique.

Peyronie's disease is often associated with erectile dysfunction and Steve Wilson, in 1994, described a technique of re-modelling the bent penis over an inflatable penile implant thus managing both problems. François Gigot de la Peyronie may not have been the first to describe Peyronie's disease, but it will always be associated with his name; it's a pity we always get his name wrong!

Next time...why we size catheters using the French scale.

P.S. I don't usually give references but this is an interesting read (I'm not saying I agree with their conclusion though!): Musitelli S, Bossi M, Jallous H. A brief historical survey of Peyronie's disease. *Journal of Sexual Medicine* 2008;**5(7)**:1737-46.



François Gigot de la Peyronie.