

## Penetrating Trauma of the External Genital Organs with Extensive Urethral Involvement

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### 1. Abstract

Penetrating trauma to the external genitalia is rare and it's commonly encountered in young people. We are reporting a case of external genital trauma by a stab wound with an extensive urethral injury in a 29 year old subject. The evolution after the surgical intervention was highly favourable upon the functional level (micturition and erection).

### 2. Introduction

Penetrating trauma to the external genitalia is rare and generally occurs in young people [1]. Approximately 60% of the penetrating genitourinary injuries involve the external genitalia, which include the penis and scrotum [2]. These traumas have a particular anatomo-clinical formes and are frequently accompanied by cavernous and urethral wounds [3]. Urethral trauma can occur as a result of blunt or penetrating wounds, but most oftenly seen in men after traumatic catheterisation or repetitive endoscopic manipulation . In the case of penetrating trauma to the external genitalia, an urgent surgical exploration is the rule [4]. We are reporting a case of penetrating trauma to the external genitalia with extensive urethral involvement and discussing it with differents datas from the literature.

### 3. Clinical Case

It's about a 29 years old man, without any known past medical history, was received at the emergency department for a stabbing wound to the external genitals following a physical assault . Physical examination revealed a large wound of the left peno-scrotal angle with a tense, painful scrotum and urethrorrhagia. A scrotal ultrasound was carried out as an emergency and showed a large scrotal hematoma without testicular lesion. An urgent surgical exploration found a large wound of the external genital organs with extensive rupture of more than 90% of the penile urethra (Figure 1) and luxation of the right testicle (Figure 2).

Our surgical attitude was urethrorrhaphy on a catheterised urethra by separated points with a resorbable 4-0 moncryl suture ,reintegration of the testicles into the scrotum with orchidopexy of the luxated right testicle (Figure 3) and closure of the wound in two planes.

The urinary catheter was removed after 15 days and the patient has regained a normal spontaneous urination after removal of the catheter and did not complain of any voiding or erectile dysfunction. One month later, a retrograde urethrocytography was performed showing no obstructive anomalies (Figure 4).



Figure 1: Extensive rupture penile urethra



**Figure 2:** Luxation of the right testicle image



**Figure 3:** Reintegration of the testicles with orchidopexy of the luxated right testicle



**Figure 4:** Retrograde urethrocytography showing no obstructive anomalies

#### 4. Discussion

Trauma of the external genital organs in males can lead to damages to the scrotum, testicle and testicular appendages. Associated lesions should be carefully searched for because they are present in 20 to 30% of cases [5]. These are mainly traumas of the penis or urethra, skin lesions on the perineum or thighs, and/or abdominal visceral lesions. Trauma to the anterior urethra accounts for about

10% of urogenital traumas [6]. In our case, the trauma also concerned the external genital organs with significant damage to the anterior urethra.

If the management of simple contusions poses few problems, it is not the same for the partial ruptures and especially total ruptures, which can be treated immediately as an emergency, or remotely at the stage of stenosis [7]. For our patient, the urethral damage

was partial but extensive and The repair was immediate as an emergency.

In any stabbing trauma of the male external genitalia , an urgent Surgical exploration is the rule . In an open trauma, severe testicular injuries as well as bilateral trauma are more frequent. Testicular preservation rates are quite low, ranging from 35 to 50% [8]. We have carried out an emergency exploration. The procedure consisted of urethrorrhaphy, reintegration of the testicles and orchidopexy of the luxated right testicle.

The evolution was highly favorable marked by normal urination and good erection.

## 5. Conclusion

penetrating trauma of the external genitalia can cause urethral strictures, sexual and psychosocial problems. A good anatomical knowledge and experienced practice are essential for a good evolution and to avoid the possible complications as well.

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