

A rare foreign body into the male penile urethra

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ABSTRACT

A wide variety of urethral foreign bodies have been described in the literature. In adults, this is commonly caused by the insertion of objects used for masturbation, and is often associated with a mental disorder as in our case described herein. We report a 28-year-old man, hospitalized for self-insertion of a pen into the urethra. The pen was removed successfully by surgery.

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Despite its inaccessibility, every conceivable object has been inserted into the urethra. A great variety of self-inflicted foreign bodies have been removed from the lower urinary tract of male external genitalia.¹ Foreign bodies of the urethra are seen with iatrogenic injury, self-insertion, and rarely migration from adjacent sites. Self-insertion of foreign bodies into the urethra is usually carried out for erotic stimulation.^{1,2} Foreign bodies particularly of the male urethra are common, varied in nature and require careful inventive maneuvers for removal by an experienced urologist in an operating theater fully equipped with endoscopic instruments. We aim to stress and alert the readers that the method we used was limited to foreign body protruding from the meatus or visible in the fossa navicularis. In other cases, a foreign body should not be handled in the emergency department.

Case Report. A 28-year-old male presented to the emergency department with dysuria and pain of 24 hours duration. There was no history of microscopic or gross hematuria, acute urinary retention, urethral

discharge, fevers or chills, and history of urinary complaints. There was suprapubic tenderness. Examination of the external genitalia at this stage, revealed a foreign body protruding through the external meatus. He initially maintained ignorance regarding the foreign body, but on repeated questioning, admitted that he inserted the foreign body through the meatus out of curiosity, but could not remove it. He gave a history of introduction of a 9 cm long pen through the external meatus into the urethra for the purpose of erotic stimulation. Diagnosis was determined by clinical history and careful physical examination.

Foreign body located distal to the urogenital diaphragm was palpated directly. A plain abdominal x-ray (**Figure 1**) showed approximately 2 cm long linear radio-opaque shadow lying transversely in the pelvis. He was taken to the operating room after urology consultation, and after performing a meatotomy, a 9 cm part of a pen (**Figure 2**) was carefully removed. He received complete postoperative inpatient psychiatric evaluation. Psychiatric evaluation of the patient showed mental retardation. He was observed in the hospital for bleeding, obstruction, and infection for

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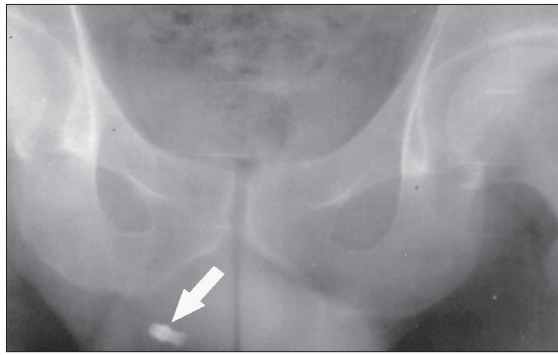


Figure 1 - Plain radiography showing visible section of the foreign body.

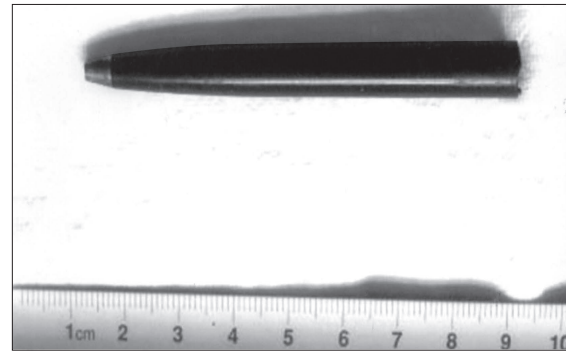


Figure 2 - Photograph of foreign body.

one day. He was subsequently discharged home as there was no complications.

Discussion. Many cases of intraurethral foreign bodies of great variety and unusual nature have been reported.^{1,3,4} Our review encompassed approximately 300 single case reports on foreign bodies in the English literature published between 1949 and 2005.^{2,5} Foreign bodies are most commonly inserted into the genitourinary tract. Most of them are due to self-instrumentation, but only one case⁶ of pen insertion into the penile urethra by the patient was as in our case described herein. The reasons for introduction of objects into the urinary tract could be psychiatric, accidental, sexual stimulation, curiosity especially among adolescents, and therapeutic in cases of stricture urethra or to commit suicide.^{1,2,7} In our case, the purpose of insertion of pen was masturbation and the patient was mentally ill. Besides this, it has been documented that well-adjusted patients without concomitant psychiatric illnesses have attempted to relieve urinary retention or itching by inserting objects into the urethra.⁸

The genitourinary tract seems to be an inaccessible site for the introduction of foreign bodies, particularly in males.^{1,3} But, according to research made in Japan, the incidence of sexual or erotic as the most common motive associated with foreign bodies of the genitourinary tract was higher in males than in females, the ratio being 1.7:1 between 1963-1982.⁴ In many cases, multiple urethral foreign bodies have been described. The types of foreign body, include plastic caps, chewing gum, vinyl tube, hooked wire, paper clips, metal objects, glass rods, shells, light bulbs, and so forth.^{1-3,5,7} However in our case, the foreign body was a part of a pen. This is the second⁶ published report in the literature. Patients of this cases usually present with dysuria and pain. Other presenting complaints include difficulty in voiding,

hematuria and swelling of genitalia, extravasation of urine, abscess formation, purulent discharge, and so forth. This is not a fatal disease; however, it may lead to serious complications such as chronic cystitis, urolithiasis, or rectal abscess formation.^{1,3,9,10} In our case, the patient had no urological complications after treatment. But, we want to add that the insertion of a foreign body through the penile urethra resulting in perforation of the urinary bladder and abdominal hemorrhage may cause an accidental autoerotic death.^{2,10} Depending on the type of foreign body and its location, various methods of removal have been described, including meatotomy, cystoscopy, internal or external urethrotomy, suprapubic cystostomy, Fogarty catheterization, and injection of solvents.³ When possible, endoscopic, and minimal invasive techniques of removal should be used.¹⁰ In the case presented, this was carried out by meatotomy.

After review of the current literature, including clinical features, diagnostic maneuvers, and methods of treatment of the self-inserted foreign body, the authors suggest that psychiatric evaluation should always follow in order to discover mental underlying disorders, thus reducing the risk of recurrence.⁷ In our case psychiatric evaluation was made and the patient showed mental retardation.

In conclusion, foreign bodies are common, but also important and interesting. They are generally inserted into genitourinary tract for sexual stimulation by adult patients with psychiatric disorders, which should also be evaluated. This disease is not fatal, however, it may lead to serious complications and accidental autoerotic death.

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