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Outpatient Surgery for Penile Venous Patch With the Patient Under Local Anesthesia

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Although local anesthesia for penile surgery has been widely reported, its application for penile venous patch, however, has not been published. We evaluated an anesthetic and surgical technique on an outpatient basis. From March 1993 to September 2001, a total of 29 men with penile deformity, aged 27 to 77 years (mean 55 years) received a penile venous patch for morphologic correction. They received autologous grafting of the deep dorsal vein under local anesthesia as an outpatient procedure. The anesthetic effect and postoperative results were satisfactory. The average available area of the deep dorsal vein was $5.7 \times 2.5 \text{ cm}^2$. The common immediate side effects included puncture of the vessels, subcutaneous ecchymosis, and transient palpitation, but there were no significant late complications. All patients returned home uneventfully. This has been proven to be a cost-effective, simple, and safe method with fewer complications. It offers the advantages of lower morbidity, protection of privacy, fewer adverse effects of anesthesia, and a more rapid return to activity with minimal complications.

Key words: Penile curvature, impotence, topical block, venous grafting, epinephrine

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