

Re: Ozlu et al.: False Penile Fracture: Case Series and Literature Review [Grand J Urol 2021;1(1):9-13]

Re: Özlü ve ark.: Yalancı Penil Fraktür: Olgu Serisi ve Literatürün Gözden Geçirilmesi [Grand J Urol 2021;1(1):9-13]

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Dear editor,

We have read with great interest, the case series and literature review of false penile fracture by Ozlu et al. in which the authors share clinical experience with more than 100 patients over a 13-year period [1]. By examination of operative reports, they retrospectively evaluated the patients with a pre-diagnosis of penile fracture and frankly reported a misdiagnosis rate of approximately 8%. This ratio is comparable and consistent with the literature [2-5]. Examining the patient clinical and operative characteristics, shown as a table on a separate page, we see that only two of total eight false penile fracture cases underwent radiological examination. Magnetic resonance imaging (MRI) was preferred in these patients, and it was stated that one of them was MRI positive (patient 4) and the other was MRI false positive (patient 2). Patients with a tunical tear in preoperative MRI, but no tear in surgical exploration were considered to have false penile fracture. Since only ligation procedures were performed on both MRI positive and MRI false positive patients, we think that such a distinction is confusing and not necessary. Perhaps ultrasonography could be preferred for the remaining six patients for whom radiological examination was not performed, due to its easy accessibility and provide medical recording. However, an ideal radiographic imaging modality is still lacking so far [6]. Although there are some clinical differences between false and true penile fractures,

the two conditions cannot be clearly distinguished from each other either clinically or radiologically [3].

Consequently, we would like to encourage Ozlu et al., on a very diligently written and quite informative article that briefly summarizes the studies that have already been published and the approach to the patient with penile fracture. Urologists somehow have to base the definitive diagnosis of penile fracture on surgical exploration in order to eliminate serious long-term potential problems of an overlooked tunical tear.

Sincerely yours.

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