Case of the Week

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37M with erectile dysfunction
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Peyronie Disease
• Acquired cause of erectile dysfunction and penile curvature
• Palpable plaque in the tunica albuginea and corpus cavernosum¹
• Prevalence of 3%²

Clinical

- **Acute phase (12-18 months)**
  - Pain and flaccidity during intercourse
- **Chronic phase**
  - Penile deformity (angulation and shortening)
- Surgery typically delayed until acute phase is over
Imaging

• MR
  – Used for accurate depiction of deformity, tunical thickness, plaque position, and cavernososal diameter\(^3\)
  – Low signal on T1- and T2-WI

• US
  – Able to detect calcified plaques

Figure 12.  (a) Peyronie disease in a 33-year-old man. Coronal T2-weighted MR image obtained after the intracavernosal injection of prostaglandin E1 shows a peripheral plaque in the distal left corpus cavernosum (arrow) causing a visible deformity. There is no significant enhancement after contrast material administration. (b, c) Peyronie disease in a 32-year-old man. (b) Coronal T2-weighted MR image obtained after the intracavernosal injection of prostaglandin E1 shows extensive plaque in the distal corpora cavernosa (arrowheads). (c) Gadolinium-enhanced gradient-echo MR image shows patchy, mild peripheral enhancement (arrows), most prominent in the peripheral plaque on the left side of the image.
