

Penile Fracture Seems More Likely During Sex Under Stressful Situations

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ABSTRACT

Introduction. The unusual event of penile fracture occurs when there is a disruption of the tunica albuginea surrounding engorged erectile tissue during aggressive sexual behavior. There is often an audible crack and rapid detumescence with subcutaneous hemorrhage that follows.

Aims. Medical literature has described the etiology and treatment of penile fracture. We report the remarkably unusual social situations of a series of patients who sustained this unique injury.

Methods. We conducted a retrospective chart review of 16 patients whose injury was severe enough to require surgical repair at the University of Maryland between 2007 and 2011. Particular attention was paid to the intake interview in the emergency department and the postoperative chart notes by the attending urologist to ascertain out-of-the-ordinary social situations in which the injury was sustained.

Main Outcome Measures. The occurrence of penile fracture is sufficiently rare that the author was able to interact personally with most of the patients. The patients were remarkably forthcoming with the personal social dynamics of the sexual encounter.

Results. Half of these penile fracture patients sustained the injury during an extramarital affair. Only three patients sustained the injury in a bedroom; the remainder was in out-of-the-ordinary locations for sexual intercourse, e.g., cars, elevator, the workplace, and public restrooms.

Conclusions. Penile fracture patients appear to be a unique population of men who are having sexual intercourse under stressful situations. Extramarital affairs and out-of-the-ordinary locations appear common in patients sustaining this relatively rare injury. **Kramer AC. Penile fracture seems more likely during sex under stressful situations. J Sex Med 2011;8:3414–3417.**

Key Words. Penile Fracture; Sexual Trauma; Rupture of Tunica; Extramarital Affairs

Introduction

Penile fracture occurs when the erect penis sustains trauma. Usually the history is of an individual having a forceful bending of the penis during aggressive sexual intercourse featuring unusual sexual positions [1,2]. The fracture is often heralded by an audible crack followed by rapid detumescence, severe pain, subcutaneous swelling, and hemorrhage. The tunica albuginea is ruptured or torn during the bending or buckling of the penis and must be repaired surgically or erectile

dysfunction may result [3–5]. The injury is rare with a low and possibly underreported occurrence [6].

Research has been done concerning the mechanism [7,8] and surgical treatment algorithm [9–12] but no reports have delved into the social dynamics surrounding penile fracture. The author has long observed that patients presenting with penile fracture often have an unusual set of social circumstances as the milieu in which the sexual intercourse occurred. We compile data from 16 patients who sustained penile fracture to illustrate this opinion.

Table 1 Demographic and clinical characteristics

Age, mean	43.7
Race	
White N (%)	8 (50)
Black N (%)	8 (50)
Relationship status	
Single, N (%)	6 (37.5)
Married, N (%)	10 (62.5)
Sexual orientation, straight N (%)	16 (100)
Intercourse preceded injury N (%)	14 (87.5)
Sex occurred in an atypical scenario	11 (68.7)
Incident during extramarital affair	7 (43.8)
Sex was not in a bed	6 (37.5)
Sex was in an elevator	1 (6.3)
Sex was while at work	3 (18.8)
Sex was in a public bathroom	2 (12.9)
Sex was in an automobile	2 (12.9)

Methods and Materials

Data was collected by retrospective review of patients who underwent surgery at the University of Maryland Hospital with a diagnosis of penile fracture. Sixteen patients were identified between June 2004 and May 2011. The chart was examined with particular attention to the intake interview in the emergency department and the attending urologist chart notes. Often the attending urologist was the author. Demographic data and patient behavior before and during the traumatic event was catalogued. Table 1 notes demographic data and the out-of-the-ordinary locations of the sexual event. Table 2 describes each individual patient in more detail. All of these patients presented within 12 hours of the traumatic event. Two patients are illustrative of the unique social history of these patients.

Clinical Case 1: A married 41-year-old man was out with coworkers at an after-work cocktail party. There he met a woman, and the two decided they wanted to have sexual relations. They left together in one car, but in the parking lot decided they should not drive because of consumption of alcohol. They had sexual relations in the back seat of the car until the man felt a “pop” in his penis with rapid detumescence. He presented to the emergency department with a penile fracture.

Clinical Case 2: An unmarried man has been romantically involved with a coworker for 6 months. He reports that this has been largely hidden from work colleagues. He reported that they often met for sexual liaisons within different parts of their office building. On one such occasion they were having sex within a locked bathroom after work hours. He also presented with a penile fracture.

Results

Careful history taking of the environment and social dynamics of 16 patients sustaining penile fracture revealed the majority had what could be described as unusual circumstances surrounding their sexual trauma. Two patients steadfastly

Table 2 Patient characteristics

Patient 1	Married, denies sexual trauma
Patient 2	Married, denies sexual trauma
Patient 3	Sexual trauma Unmarried Sex at work (1/3)
Patient 4	Sexual trauma Married Extramarital affair (1/7) in public restroom (1/2)
Patient 5	Sexual trauma Unmarried Sex at work (2/3) in an elevator (1/1)
Patient 6	Sexual trauma Married Extramarital affair (2/7)
Patient 7	Sexual trauma Unmarried Sex in an automobile (1/2)
Patient 8	Sexual trauma Unmarried
Patient 9	Sexual trauma Unmarried
Patient 10	Sexual trauma Married Extramarital affair (3/7) Sex in an automobile (2/2)
Patient 11	Sexual trauma Married Extramarital affair (4/7) Sex in an office (1/1) and at work (2/3)
Patient 12	Sexual trauma Married Extramarital affair (5/7) and in a bathroom (2/2)
Patient 13	Sexual trauma Unmarried Sex at work (3/3)
Patient 14	Sexual trauma Married Extramarital affair (6/7)
Patient 15	Sexual trauma Married Extramarital affair (7/7)
Patient 16	Sexual trauma Married

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