Dorsal Slit of the Foreskin

Incision of the top of the foreskin to relieve tightness preventing retraction

This patient information leaflet is drawn from the consensus panels of many worldwide urological societies, as a supplement to any advice that you may already have been given. Alternative treatments are outlined below and can be discussed in more detail with Dr Campbell.

What are the alternatives to this procedure?

Circumcision, observation.

Before the procedure

Please be sure to inform Dr Campbell in advance of your procedure if you have any of the following:

- ~An artificial heart valve
- ~A coronary artery stent
- ~A heart pacemaker or defribrillator
- ~ An artificial blood vessel graft
- ~A neurosurgical shunt
- ~ Any other implanted foreign body
- ~ Blood thinning medications, particularly
 - ~Asasantin
 - ~Aspirin
 - ~ Fish oil
 - ~ Iscover
 - ~ Persantin
 - ~ Plavix
 - ~ Pradaxa
 - ~ Warfarin
- ~Angina
- ~ Hypertension
- ~ Diabetes
- ~ Recent heart attack

You will usually be admitted on the day of surgery. You may be asked to attend a pre-admission clinic 5-10 days before the procedure to assess your general fitness and to perform some baseline investigations.

If you are taking Warfarin, Clopidogrel, Iscover, Asasantin, Pradaxa or Persantin on a regular basis, you must discuss this with Dr Campbell because these drugs can cause increased bleeding after surgery. There may be a balance of risk where stopping them will reduce the chances of bleeding but this can result in increased clotting, which may also carry a risk to your health. This will, therefore, need careful discussion with regard to risks and benefits.

You will be asked not to eat or drink for 6 hours before surgery. Immediately before the operation, you may be given a pre-medication by the anaesthetist which will make you drymouthed and pleasantly sleepy.

After admission, you will be seen by other members of the urological team which may include not only Dr Campbell, but the specialist registrar, the intern, and your named nurse. The specialist registrar may perform the procedure in conjunction with Dr Campbell and with your permission.

Where do I go for my procedure?

The admissions section of the hospital at the appointed time, on the appointed day. The admissions section of the particular hospital will give you instructions well in advance of the operation. If no contact has been made telephone Dr Campbell's secretary on (07) 3367 1608, and the problem will be addressed.

Do I need to do anything special before my procedure?

You will need to not drink or eat anything for 6 hours prior to the procedure.

Dorsal Slit of the Foreskin continued...

During the procedure

A full general anaesthetic (where you will be asleep throughout the procedure), a spinal anaesthetic (where you are awake but unable to feel anything from the waist down) or a local anaesthetic injection around the penis may be used. All methods minimise pain; your anaesthetist will explain the pros and cons of each type of anaesthetic to you.

Local anaesthetic is also injected into the base of the penis to aid pain control after the operation; this can be used as the sole form of anaesthesia in some patients. All methods minimise post-operative pain.

In this operation, the foreskin will be divided on the top of the penis leaving the head of the penis partly exposed.

The operation takes approximately 60 minutes to complete.

Immediately after the procedure

You may experience discomfort and swelling for a few days after the procedure, but painkillers will be given to you to take home. Absorbable stitches are normally used which do not require removal.

Vaseline should be applied to the tip of the penis and around the stitch line to prevent the penis from adhering to your underclothes and it is advisable to wear light clothing. Passing urine will be painless and will not be affected by the operation.

The average hospital stay is less than 1 day.

Are there any side-effects?

Most procedures have a potential for side-effects and these are outlined below. Please use the check circles to tick off individual items when you are happy that they have been discussed to your satisfaction:

Common (greater than 1 in 10)

~ Swelling of the penis lasting several days

Occasional (between 1 in 10 & 1 in 50)

- ~ Bleeding of the wound occasionally needing a further procedure
- ~ Possible infection of the incision requiring further treatment and/or an Emergency Department visit
- ~ Permanent altered or reduced sensation in the head of the penis
- ~ Persistence of the absorbable stitches after 3-4 weeks, requiring removal

Rare (less than 1 in 50)

- ~ Scar tenderness
- ~ Failure to be completely satisfied with the cosmetic result
- ~ Occasional need for removal of excessive skin at a later date
- ~ Permission for biopsy of abnormal area on the head of the penis if malignancy is a concern

General side-effects of any procedure

Any operative procedure that involves regional (spinal) or general anaesthetic can have side-effects. These are explained in the leaflet on anaesthesia.

Hospital-acquired infection

- ~ Colonisation with MRSA (0.02%; 1 in 5,000)
- ~ Clostridium difficile bowel infection (0.04%; 1 in 2,500)
- ~ MRSA bloodstream infection (0.01%; 1 in 10,000)

(These rates may be greater in high-risk patients e.g. with long-term drainage tubes, after removal of the bladder for cancer, after previous infections, after prolonged hospitalisation or after multiple admissions)

Dorsal Slit of the Foreskin continued...

What should I expect when I get home?

It will be at least 10 days before healing occurs and you may return to work when you are comfortable enough. Most people require at least 7 days off work.

You should refrain from sexual intercourse for a minimum of 4 weeks.

When you leave hospital, a discharge summary of your admission will be sent to your family doctor. This holds important information about your inpatient stay and your operation.

What else should I look out for?

There will be marked swelling of the penis after a few days. This will last 3-4 days and will then subside but do not be alarmed because this is expected.

If you develop a temperature, increased redness, throbbing or drainage at the site of the operation, please contact Dr Campbell.

For after-hours emergencies Dr Campbell can be contacted on (07) 3367 1608.

The Wesley Hospital Emergency Centre (o7) 3232 7333, the Greenslopes Private Hospital Emergency Centre (o7) 3394 7111 and St Andrew's Emergency Centre 3834 4455 are other resources that are also available.

Are there any other specific points?

Follow up is not always necessary and Dr Campbell will discuss what arrangements should be made.

Is there any research being carried out in this field?

There is no specific research in this area at the moment but all operative procedures performed are subject to rigorous audit at monthly Audit & Clinical Governance meetings.

Dorsal Slit of the Foreskin continued...

Who can I contact for more help or information?

Dr Peter Campbell

Suite 9, level 9, Evan Thomson Building, The Wesley Hospital, Chasely St, Auchenflower, QLD 4066 (07) 33671608, www.campbellurology.com.au

The Wesley Hospital, Urology Ward

451 Coronation Drive, Auchenflower, QLD 4066 (07) 3232 7168 www.uhc.com.au/wesley

The Wesley Emergency Centre

451 coronation Drive, Auchenflower, QLD 4066 (07) 3232 7333

Greenslopes Private Hospital, Continence Advisor

Newdgate St, Greenslopes, QLD 4120 (07) 3394 7978 www.greenslopesprivate.com.au

Greenslopes Private Hospital Urology Ward

Newdgate St, Greenslopes, QLD 4120 (07) 3394 7261 www.greenslopesprivate.com.au

Greenslopes Private Hospital Emergency Centre

Newdgate St, Greenslopes, QLD 4120 (07) 3394 6777 www.greenslopesprivate.com.au

St Andrew's War Memorial Hospital Emergency Department

457 Wickham Tce Brisbane, QLD 4000 (07) 3834 4455 www.uchealth.com.au/sawmh

The Queen Elizabeth II Jubilee Hospital, Urodynamics Department

Kessels Rd, Coopers plains, QLD 4108 (07) 3275 6346

American Urological Association Foundation

1000 Corporate Blvd, Suite 410, Linthicum, MD 21090 1800 828 7866 www.UrologyHealth.org

Thank you for taking the trouble to read this information sheet. If you are satisfied with the explanation of the test, please sign below and this leaflet will be filed in your chart.

If you wish to retain a copy for you own records, one will be provided.

I have read this information sheet and I accept the information it provides.

Signature Date