

Penile Adhesions

Treatment Options

This handout explains the condition penile adhesion, how to care for it, how to treat it if it is mild, moderate or severe, and when to call the doctor.

What are penile adhesions?

- Note: Circumcision is the procedure that removes foreskin from the penis.
 - **Uncircumcised babies:** A penile adhesion is a small band of tissue that connects the foreskin to the head of the penis.
 - Babies are often born with adhesions under the foreskin. This is normal, and with time, the adhesions usually go away on their own by 5 years of age if your baby does not get a circumcision.
 - **Circumcised babies:** A penile adhesion is a small band of tissue that connects the ridge where the foreskin used to be to the head of the penis.
 - Penile adhesions usually occur when your child is still in diapers.
 - Many adhesions will go away on their own, but some may require treatment.
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How do I care for penile adhesions?

- Smegma is a white substance made up of dead skin cells and oil. It is common to see smegma under foreskin or the adhesion. This is normal and not a sign of infection.
 - Do not try to force the foreskin back. This can cause pain and bleeding. The irritation from forcing the foreskin back can lead to more adhesions or scarring.
 - Contact your provider's office if:
 - The penis is red, swollen, or painful.
 - Your child has pain when peeing.
 - The foreskin swells up like a balloon when your child pees.
 - **If your child cannot pee for 8 hours, take your child to the Emergency Department.**
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How do we treat penile adhesions?

Your doctor will let you know if your child has a mild, moderate or severe case of penile adhesion. They will also discuss treatment options with you.

Mild penile adhesion

- Keep the area clean. You may need to change your baby's diaper more often to keep damp, stale urine off the penis. Wash the area several times per week.
 - Your provider may recommend you use a damp washcloth while bathing to gently push back the adhesion without force.
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To Learn More

- Urology
206-987-2509
- Ask your child's healthcare provider
- seattlechildrens.org

Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.

Moderate penile adhesion

- Your provider may recommend treatment with a prescription steroid cream called betamethasone valerate 0.1% (Valisone).
- Gently pull the foreskin back, exposing the adhesion without causing pain.
- Apply a dab (a pea-sized amount) of cream to the foreskin allowing it to absorb.
- Do this twice a day for 6-8 weeks depending on what your provider recommends.
- The area may become slightly red at the site of application - this is because the area has more blood vessels (is more vascularized) while using the steroid cream. The redness should go away after you stop using the cream.
- As the adhesion begins to release, you may notice a small amount of blood in the diaper. If you see this, apply petroleum jelly (Vaseline) to protect the skin. Call your doctor's office if you notice signs of infection such as spreading redness, pain, swelling, yellow or green discharge with odor, or a fever.

For severe cases:

- Your provider may recommend a procedure.
- For babies with foreskin (uncircumcised), your provider might recommend a circumcision. This is a day surgery completed in the operating room under general anesthesia. Please see our handout "Circumcision: Care After Surgery" for more information.
seattlechildrens.org/pdf/PE151.pdf
- For babies without foreskin (already circumcised), a penile adhesion release surgery may be advised - called a lysis of adhesion. Depending on several factors, your doctor will recommend this procedure either be completed in the office or in the operating room.
- We make a small surgery cut (incision) on the adhesion to separate it. This incision will not affect how your child pees.

Operating Room Lysis of Penile Adhesions

When will my child be able to go home?

Most children go home the day of surgery. If your child has another medical condition, they may need to stay overnight.

Where can I watch videos that explain how to care for my child after surgery?

We created videos to explain how to care for your child after surgery. You can click the link, scan the QR code or search for these titles on YouTube. You may need to login due to age restrictions.

"How to Care for Your Child After Urologic Surgery"
youtube.com/watch?v=epLQn5D62wk



"How to Care for Your Child After Penile Surgery"
youtube.com/watch?v=ppZeEKY848M



How do I care for the surgery site?



Check the penis with each diaper change or 3-5 times a day for potty-trained children.

- Apply petroleum jelly directly on the surgery site each time you check the penis.
- **Do not use antibiotic ointment.**
- You may need to push back lightly on the skin around the adhesion to get the petroleum jelly onto the surgery site.
- Continue to apply for at least 2 weeks after surgery.

How do I care for the dressing (if used)?

Your child has 1 of 2 types of bandage (dressing).

- Clear dressing:** this will fall off on its own some time from 2 to 10 days after surgery. You do not need to remove this.
- White dressing:** remove this 2 days after surgery at home. The dressing helps to reduce the risk of bleeding and swelling.
- If the dressing becomes very dirty with poop (stool) that cannot be wiped off, remove the dressing right away so you can clean the incision. It is ok to rinse off poop even if it is less than 48 hours after surgery.
- If you removed the dirty dressing or it falls off early, do not replace it.

To remove the white dressing:

1. Have your child sit in a warm bath for about 10 minutes. This helps loosen the dressing and makes it easier to remove.
2. If the bandage is not loosening, have your child sit in the bath for another 10 to 20 minutes.
3. If the dressing is still not coming off easily or seems to be stuck, apply 1 cup of oil (corn, vegetable, olive or baby oil) directly on the penis. Allow this to soak in for 20 minutes and then remove the dressing.
4. If the dressing is still not coming off, call the Urology clinic for more tips.

Can my child take a bath, shower, swim or get wet?



- It is ok to sponge bathe your child after surgery. Avoid showers and baths for 48 hours (2 days) after surgery.
- It is ok for showers or baths after 2 days, but do not soak for longer than 10 minutes.
- It is ok to rinse off poop even if it is before the 2-day bath cutoff.
- No swimming for 2 weeks.

What can my child eat after surgery?



- Your child will start with a light diet.
- It is common for children to feel sick to their stomach (have nausea) and throw up (vomit) after surgery. Slowly give your child clear liquids to help.
- When fully awake, your child may have clear liquids like 7UP, Jell-O, Popsicles and apple juice.
- If your child is not sick to their stomach or throwing up and is fully awake, start their regular diet.

What can I expect during the healing process?

- The area around the surgery site will be swollen and red. You may also notice some bruising, yellow crusting or scabbing. This will get better with time but can take up to 2 months to heal.
- You can expect mild blood spots in the diaper or underwear the first days after surgery.
- If you notice that your child's diaper or underwear is saturated with blood or you can see the surgery site actively dripping with blood, apply constant pressure to the area for 5 minutes to stop the bleeding.
 - **If the bleeding continues, call the Seattle Children's Main Campus Emergency Room at 206-987-2222.**

How much activity can my child do?

If your child is younger than 2 years of age:



Watch your child closely on the day of the surgery.

Car seats and stroller straps are safe. Use as instructed by the manufacturer. Younger children will limit their own crawling, walking and activities.

Avoid any straddle activities with your child that would increase pressure between the legs for 2 weeks.

Do not:

- Hold your child on your hip.
- Bounce your child on your knee.
- Use baby-wearing devices where your baby's legs are separated.
- Use bouncer toys with a harness.

If your child is 2 years of age or older:



A good guideline is to keep both of your child's feet on the ground for 2 weeks. Avoid strenuous activities, rough-housing or activities that involve straddle-activity.

For 2 weeks, do not let your child do the following:

- Jungle-gyms/climbing
- Gym class/physical education (PE)
- Bicycles/tricycles
- After-school sports

When can my child return to school or daycare?

Your child may return to school when they no longer need opioid pain medicine or frequent daytime over-the-counter pain medications. Keep in mind that school or daycare staff will need to be comfortable putting the petroleum jelly on your child's penis or your child will need to do this.

Will my child have pain?

- After surgery, your child will likely feel pain in the groin.
- We partner with you and your child to relieve pain as much as possible. You know your child best. We encourage you to take an active part in your child's recovery. No matter the level of your child's pain, believe they are hurting and respond right away. Your child should feel better the next day.
- For more information about pain, read our handout "Acute Pain".
seattlechildrens.org/pdf/PE503.pdf

How do I manage my child's pain?



- Effective pain control will help your child feel better and heal faster. Start by giving your child acetaminophen (Tylenol) alternating every 3 hours with ibuprofen (Advil or Motrin) for the first 2 days after surgery and then you will use it as needed. Use this medication only if recommended by your child's healthcare provider. Check with the healthcare provider first before giving any type of medicine to your child.
- If your child's healthcare provider prescribed an opioid medication for pain, use this if the acetaminophen or ibuprofen does not help relieve pain.
- Tylenol and prescription pain medicine may not be safe to use at the same time. Check with your healthcare provider or pharmacy.
- In addition to medicine for pain, you can also help your child cope by distracting them with music, games, books, TV or videos.

How do I dispose of unused medication?

- To keep your family safe, store medicines inside a locked cabinet or location where others cannot easily get to them. Once your child has recovered from surgery, dispose of all unused prescription medicines.
- Taking leftover pain or other medicines, on purpose or by accident, can be very dangerous.
- For more information about safe disposal of unused opioid medicine, read our handout "Safe Use and Disposal of Opioid Medicines" (seattlechildrens.org/pdf/PE3140.pdf) or visit takebackyourmeds.org to find a take-back place near you.

When do I call?



If your child is having any problems from the list below, call our office Monday to Friday from 8:00 a.m. – 4:30 p.m. at **206-987-2509 option 4**.

After hours, call **206-987-2000** and ask the operator for the Urologist on call.

- Fever higher than 101.5° F (38.6° C)
- Redness, swelling or discharge (fluid) from the wound
- Rapid swelling or bleeding from the surgery site
- Severe, constant pain at the surgery site not controlled by the medicine prescribed
- Throwing up (vomiting) 4 or more times in 12 hours
- Cannot pee for 8 hours after surgery
- Blood-soaked diaper or underwear with bleeding that continues after applying constant pressure for 5 minutes.
 - **If the bleeding continues, call the Seattle Children's Main Campus Emergency Room at 206.987.2222.**

In-office lysis of penile adhesions

What do I need to know before the procedure?

- You can make your appointment for in-office procedures by calling the urology scheduling center at **206-987-2509 opt. 1**.
- **It is important to arrive on time for this appointment or the procedure may be cancelled.**
- Please arrange childcare for your child's siblings during the procedure visit.
- Expect to be here for about 1 hour. The procedure itself will take about 10 minutes with the physician. Usually, you can go home 10-15 minutes after the procedure.
- Depending on the procedure, the doctor may ask you to leave the room.
- **Required items to bring to visit:**
 - Children's ibuprofen (Advil, Motrin)
 - Children's acetaminophen (Tylenol)
 - Petroleum jelly (Vaseline)
 - Clean diapers (if your child is currently using diapers)
- Child Life Therapy (to help with anxiety and distraction techniques) will be available for children 2 years and older.
- Your child can eat and drink any time before and up to the procedure.
- Please bring anything from home that will help to comfort or distract your child.

What can I expect after the procedure?

- Check the penis with each diaper change or 3-5 times daily for potty-trained children.
- The penis may look red and swollen. It will return to normal in a few weeks.
- If active bleeding occurs, apply constant pressure around the whole penis with a clean washcloth for 5 minutes.
 - **If the bleeding continues, take your child to a hospital emergency room.**

How do I care for the surgery site at home?



- Apply petroleum jelly directly onto the surgery site each time you check the penis.
 - Do not use antibiotic ointment.
- You may need to push back lightly on the skin around the adhesion to ensure that the petroleum jelly is applied onto the surgery site.
- Continue to apply for at least 2 weeks after surgery.

Will my child have pain after surgery?

- After surgery, your child will likely feel pain in the groin. Your child should feel better the next day.
- We partner with you and your child to relieve pain as much as possible. You know your child best. We encourage you to take an active part in your child's recovery. No matter the level of your child's pain, believe they are hurting and respond right away. Effective pain control will help your child feel better and heal faster.

How do I manage my child's pain?



- Start by giving your child acetaminophen (Tylenol) alternating every 3 hours with ibuprofen (Advil or Motrin) for the first 24 hours after surgery and then you will use it as needed. Check with the healthcare provider first before giving any type of medicine to your child.

Can my child take a bath, shower, swim or get wet?



- Sponge baths only for the first 24 hours, then return to regular bathing.
- No swimming for at least 7 days.

How much activity can my child do?



- Avoid wrestling, contact sports, and rough play for the first few days to promote healing.

When do I call?



Monday to Friday, call the Urology Clinic at **206-987-2509** for questions or any of the concerns listed below. Send MyChart messages for non-urgent questions.

Nights, weekends and holidays, call **206-987-2000** and ask the hospital operator for the urology or general surgery resident on call for urgent concerns from the following list:

- Fever higher than 101.5° F (38.6° C)
- Redness and swelling that spreads up into the stomach area
- Bleeding that cannot be stopped after you have applied pressure for 5 minutes
- Your child has pain that can't be controlled by the medicine prescribed
- Cannot pee for 8 hours after surgery
- Throwing up (vomiting) 4 or more times in 12 hours

Approved by Seattle Children's Pharmacy & Therapeutics Committee 11/22