

## Case report: Paraphimosis due to erotic dancing

M. J. Ramdass<sup>1</sup>, V. Naraynsingh<sup>1</sup>, T. Kuruvilla<sup>1</sup> and D. Maharaj<sup>2</sup>

<sup>1</sup> Department of Surgery, University of the West Indies, General Hospital, Port-of-Spain, Trinidad

<sup>2</sup> Institute for Vascular Health and Disease, Albany Medical Center, Albany, USA

### Summary

Paraphimosis usually develops when a tight foreskin is retracted over the glans penis for a prolonged period. Many esoteric aetiologies have been implicated in the development of paraphimosis including piercing the foreskin, *Plasmodium falciparum* infection, application of celadine juice to the foreskin, chancroid, pessaries and the implantation of pearls. We report the first two cases of paraphimosis developing during *wining*, an erotic dance native to Trinidad & Tobago.

**keywords** prepuce, paraphimosis, erotic dance.

**correspondence** Dr Michael J. Ramdass, 100 East Drive, Champs Fleurs, St Joseph, Trinidad, West Indies. E-mail: jramdass@tstt.net.tt

### Introduction

In Trinidad & Tobago a festive period called Carnival is celebrated annually. *Wining* is an erotic dance that plays an important role in the celebrations. It involves a gyrating movement of the hips and pelvic area of the male and female while in contact. Males may become sexually aroused during this dance which can last for several hours. The prolonged erection and friction on the penis in the presence of a pre-existing tight foreskin may contribute to the development of paraphimosis.

### Case reports

#### Case 1

A 24-year-old male of African descent attended a Carnival party and performed *wining* with a young female. During this erotic dance the male sustained an erection for several hours. Later that night he presented to the surgical unit with a paraphimosis, which was dealt with by manual reduction under a penile ring block. He was subsequently circumcised electively and had an uneventful recovery. The patient had a pre-existing tight foreskin, which was retractable and reducible beyond the corona even in the erect state.

#### Case 2

A 16-year-old male who performed *wining* on a similar occasion described a sustained erection for 2 h during which

his penis was bruised from repeated friction from his clothes. He presented with gross oedema of the glans penis and superficial burns of the ventral aspect of the penis. The constriction band was reduced under local anaesthesia and the patient was discharged uneventfully. There was a history of a pre-existing tight foreskin which was retractable and reducible beyond the corona even in the erect state.

### Discussion

The male foreskin is thought to be an obstacle to coitus in early life and therefore a natural means of contraception (Cox 1995). It can, however, on occasion lead to paraphimosis in which a tight ring of preputial tissue forms a tourniquet effect, constricting the distal penis and glans (Williams *et al.* 1995). Numerous reports have described rare aetiologies for paraphimosis such as piercing of the prepuce (Jones & Flynn 1996), piercing of the glans penis (Hansen *et al.* 1984), *Plasmodium falciparum* infection (Gozal 1991), contact-derived allergic balanoposthitis paraphimosis through topical application of celadine juice (Farina *et al.* 1999), chancroid (Harvey *et al.* 1977), genital piercing (Hall & Summerton 1997), injuries to the male external genitalia in South Africa (Malherbe 1975) and implantation of pearls into the foreskin in South-East Asians (Godec 1984).

We report the first two cases of paraphimosis due to erotic dancing. We postulate that prolonged, sustained erections in the presence of a pre-existing tight foreskin combined with oedema from friction of the penis within the patient's apparel

M. J. Ramdass *et al.* **Paraphimosis due to erotic dancing**

can account for the development of paraphimosis. When recognized early, this can be easily reduced under local anaesthesia, thus preventing distal ischaemia and necrosis of the penis.

## References

- Cox G (1995) De virginibus puerisque: the function of the human foreskin considered from an evolutionary perspective. *Medical Hypotheses* **45**, 617–622.
- Farina LA, Alfonso MV, Horjales M & Zungri ER (1999) Contact-derived allergic balanoposthitis and paraphimosis through topical application of celadine juice. *Actas Urologicas Españolas* **23**, 554–555.
- Godec CJ (1984) Implantation of pearls into the foreskin in South East Asians. *Minnesota Medicine* **67**, 323–324.
- Gozal D (1991) Paraphimosis apparently associated with *Plasmodium falciparum* infection. *Transactions of the Royal Society of Tropical Medicine and Hygiene* **85**, 443.
- Hall IS & Summerton DJ (1997) 'Prince Albert's' revenge: a cautionary tale. *British Journal of Urology* **80**, 959.
- Hansen RB, Olsen LH & Langkilde NC (1984) Piercing of the glans penis. *Scandinavian Journal of Urology and Nephrology* **32**, 219–220.
- Harvey K, Bishop L, Silver D & Jones T (1977) A case of chancroid. *Medical Journal of Australia* **1**, 956–957.
- Jones SA & Flynn RJ (1996) An unusual (and somewhat piercing) cause of paraphimosis. *British Journal of Urology* **78**, 803–804.
- Malherbe WD (1975) Injuries to the skin of the male external genitalia in Southern Africa. *South African Medical Journal* **49**, 147–152.
- Williams JC, Mornson PM & Richardson JR (1995) Paraphimosis in elderly men. *American Journal of Emergency Medicine* **13**, 351–353.