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**ACUTE ISCHEMIA OF THE GLANS PENIS FOLLOWING CIRCUMCISION
PRESENTATION OF EXTREMELY RARE COMPLICATION WITH LITERATURE
OVERVIEW**

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Being one of the most commonly performed urological procedures and simultaneously one of the first procedure performed at the beginning of training, circumcision is not free of complications. Acute ischemia of the glans penis after circumcision is an extremely rare adverse event that not treated may lead to irreversible necrosis and as a consequence partial excision of the penis.

Presentation of a rare complication after circumcision with discussion of possible mechanisms of this event, available methods of treatment and literature overview.

23-year old male with phimosis was admitted to hospital in order to surgical treatment. Circumcision was performed with no visible complications. Patient was discharged from the hospital. At the first day after procedure patient came back to the ward due to lividity and swelling of the glans penis accompanied by local pain. With the objective examination no pressure or stricture at the site of the suture placement has been found. In view of no known mechanism of the found complication revision of the wound was performed and sutures were removed with no local improvement. Doppler ultrasound has not shown any features of thrombosis in the region of glans and no disturbance in blood flow in that anatomical region. On the above evidences the diagnosis of acute ischemia of glans penis with no proven mechanism was stated. The treatment was based on similar described casuistic cases and after vascular surgeon consultation.

During the hospitalization period intra venous infusion with pentoxifylline and lignocaine, antithrombotic therapy with low molecular heparin and aspirin were used. Hyperbaric therapy was maintained for 15 days. After intensified therapy lividity, swelling and pain disappeared. Very good local effect was achieved. After discharge from the urological department patient was prescribed oral pentoxifylline and aspirin for one month.

It is always a great challenge to face and deal with extremely rare complication especially after a procedure that seems to be easy to perform such as circumcision. Fortunately the available literature data may guide other urologists how they should treat such patients. There is still no consensus considering one certain mechanism of the complication. Acute glans ischemia with reference to its rarity should intensify medical watchfulness and fast reaction after suspicion of the disease.