Priapism Encyclopedia Article

Priapism

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Priapism

Priapism is a rare condition which causes a persistent, and often painful, penile erection. Priapism is drug induced, injury related, or caused by disease, not sexual desire. As in a normal erection, the penis fills with blood and becomes erect. However, unlike a normal erection that dissipates after sexual activity ends, the persistent erection caused by priapism is maintained because the blood in the penile shaft does not drain. The shaft remains hard, while the tip of the penis is soft. If it is not relieved promptly, priapism can lead to permanent scarring of the penis and inability to have a normal erection.

Priapism is caused by leukemia, sickle cell disease, or spinal cord injury. It has also been associated as a rare side effect to trazodone (Desyrel), a drug prescribed to treat depression. An overdose of self-injected chemicals to counteract impotence has also been responsible for priapism. The chemicals are directly injected into the penis, and at least a quarter of all men who have used this method of treatment for over three months develop priapism.

A physical examination is needed to diagnose priapism. Further testing, including nuclear scanning or Doppler ultrasound, will diagnose the underlying cause of the condition.

There are three methods of treatment. The most effective is the injection of medicines into the penis that allow the blood to escape. Cold packs may also be applied to alleviate the condition, but this method becomes ineffective after about eight hours. For the most serious cases and those that do not respond to the first two treatments, a needle can be used to remove the blood. The tissues may need to be flushed with saline or diluted medications by the same needle method. That failing, there are more extensive surgical procedures available. One of them shuts off much of the blood supply to the penis so that it can relax. If the problem is due to a sickle cell crisis, treatment of the crisis with oxygen or transfusion may suffice.

If priapism is relieved within the first 12-24 hours, there is usually no residual damage. After that, permanent impotence may result, since the high pressure in the penis compromises blood flow and leads to tissue death (infarction). For patients with priapism due to sickle cell disease, an antineoplastic drug (hydroxyurea) may prevent future episodes of priapism.