Penile Venous Surgery

The first reported instance of penile venous surgery took place in 1970. Wood first published “Ligation of the deep dorsal vein for atomic impotence” in the Texas Medical Journal with an admission that gradually diminished in light of the limited durability of the outcomes.

Although the continuing disappointment in the results of such procedures culminated in the 1996 ruling by the clinical advisory board of the American Urologic Association (AUA) that venous and arterial surgeries for the treatment of erectile dysfunction are not justifiable in routine use. As such, these procedures have been almost entirely abandoned by the majority of the medical community.

Microsurgical Venous stripping surgery on more than three thousand patients over a period of twenty-five years has been recently observed. Therefore, we believe that in the future, we will see a renaissance in the field.

All procedures have been performed with the consent of all patients. We would like to thank all individuals who participated in the study, as well as all the surgeons and physicians who had a role in the study.

Penile Venous Anatomy

The venous anatomy of the penis is very complex and involves multiple venous systems. The two major venous systems are the dorsal venous system and the cavernosal venous system. The dorsal venous system includes the deep dorsal vein and the superficial dorsal vein. The cavernosal venous system includes the corporal spongiosal veins and the corporal trabecular veins.

Surgical methods of penile erectile & morphological reconstruction

These insights into penile tissue, venous anatomy and erection physiology in turn - enhance clinical applications routinely utilized by physicians and surgeons, including: morphological reconstruction, penile implantation and penile venous surgery.

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Major Publications


