Intralesional Injection of Collagenase Clostridium histolyticum for the Management of **Peyronie's Disease with Indentation or Hourglass Deformity**



Introduction

- Intralesional injection (ILI) of collagenase *Clostridium histolyticum* (CCH) is the only Food and Drug Administration approved medical treatment for the management of stable phase Peyronie's disease (PD).
- To date, however, there are no published reports specifically examining outcomes of treatment in patients with PD and significant indentation or hourglass deformity.
- We sought to assess outcomes in patients receiving ILI CCH for these specific deformities.

Methods

- We conducted a retrospective chart review of 13 patients with PD and significant indentation or hourglass deformity who began ILI CCH between November 2016 and March 2019.
- A penile duplex Doppler ultrasound (PDDU) was performed prior to initiation of therapy in all patients.
- Degree of curvature was measured at the time of PDDU, after the second cycle, and 4-6 weeks after completion of the fourth cycle.
- Patients were called after completing treatment and asked whether or not they were satisfied with their injections and if they would pursue this treatment again.
- Patients answered the symptom bother domain of the Peyronie's Disease Questionnaire (PDQ) and were scored on a scale of 0-16 before, during and after treatment.

Results

- Mean age was 52.9 ± 12.6 years.
- Eight patients (61.5%) had significant indentation and five patients (38.5%) had an hourglass deformity.
- Overall, 7.7% completed 2 injections, 23.1% 6 injections, 38.5% 8 injections, and 30.8% more than 8 injections.

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Figure 1. Indentation



Figure 2. Hourglass Deformity



Table 1. Objective Improvement Outcomes

Number patients treated Mean number of injections given Mean pre-treatment degree curvature Mean change in degree (percent) curvat Mean change in degree (percent) curvatu injections Percent patients with significant improve Percent patients with significant improve with 8 or more injections **Complication rate**

Table 2. Subjective Improvement Outcomes

Mean change in PDQ Bother Score Percent patients that reported resolution Percent responders satisfied with treatm Percent responders that would pursue the

- Patients with PD and significant indentation or hourglass deformity demonstrated favorable improvements in penile curvature and bother score.
- Resolution or improvement of indentation and/or hourglass deformity can be attained, so ILI CCH indications could be expanded to include patients with these deformities.



| | Indentation | Hourglass |
|--------------------|-------------------------------------|-----------|
| | N= 8 | N= 5 |
| | 8.3 ± 3.1 | |
| | 48.1° ± 15.9° | |
| ure | 14.2° ± 10.6° (30.5% ± 21.4%) | |
| ure with 8 or more | 18.3° ± 9.4° (35.5% ± 17.1%) | |
| ement in curvature | 61.5% | |
| ement in curvature | 77.8% | |
| | 7.7% | |

| | Indentation/Hourglass | |
|----------------|-----------------------|--|
| | 6.8 ± 2.9 | |
| n | 65.3% | |
| nent | 100% | |
| reatment again | 80% | |

Conclusion



