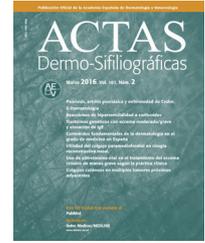




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Nonvenereal Sclerosing Lymphangitis of the Penis: Importance of the Clinical Diagnosis[☆]



Linfangitis esclerosante no venérea del pene: la importancia del diagnóstico clínico

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A 33-year-old man with no relevant history of disease was evaluated at the sexually transmitted infections clinic for the appearance of an indurated area on the penis. The induration had first appeared 2 days previously and was only uncomfortable during erection. The patient denied having engaged in risky sexual practices, although he had been more sexually active during days before onset. Examination revealed an indurated and translucent cord in the coronal sulcus. The cord had a cartilaginous consistency and was covered by a fine, mobile skin (Fig. 1). The clinical findings were compatible with sclerosing lymphangitis of the penis. We were therefore able to reassure the patient and recommended abstinence from sexual activity until the condition resolved.

Sclerosing lymphangitis of the penis affects men aged 20 - 40 years. Its presentation is very typical, as seen in the present case. The most commonly accepted explanation for



Figure 1

this condition is transient obstruction of the regional lymphatic vessels triggered by intense sexual activity during the previous 24 - 48 hours. Knowledge of this condition confirms the diagnosis and rules out a venereal origin. Furthermore, it avoids invasive tests and unnecessary treatment of a benign and self-limiting condition that usually resolves spontaneously in 1 or 2 months.

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