Rubber band wrapped circumferentially beneath the skin of the penis

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CASE REPORT

A 70-year-old man with Parkinson’s disease presented to the outpatient dermatology clinic with a linear granulation tissue overlying the dorsal aspect of the penis, of three months duration. Medical history revealed that the patient was taking Sinemet tablet for the last five years, to get relief from Parkinson’s symptoms. No history of trauma, hypertension, or diabetes. The patient had consulted several dermatologists and was treated with systemic antibiotic and topical antiseptic cream that were ineffective. The dermatological examination showed a linear lesion of red granulation tissue about 1.5 cm on the dorsal aspect of the penile sulcus, with a linear crust extending along with it. After removing of the crust, a piece of a rubber band observed (Figure 1 A and B). On palpation, the band felt beneath the skin extending in a circumferential manner around the penile sulcus. The diagnosis was settled a rubber band was embedded underneath the skin around the sulcus and part of it extruded on the surface, inducing local tissue reaction. The band was cut and pulled out (Figure 2). The granulation tissue removed by curettage, and the area behind touched by silver nitrate sticks (Figure 3). A topical fusidic acid cream prescribed for five days. The patient showed complete clearance of his lesion by two weeks.

DISCUSSION

Subcutaneous rubber band foreign bodies have been described in humans, particularly in children and the
elderly, when a rubber band is worn around a wrist or digit and is forgotten [1–3]. There are also reports of rubber band constrictions involving both the upper and lower limbs [2]. A review of PubMed and Google Scholar literature searches, no reported case of a rubber band wrapped into the skin of the penis was found. For this reason, the current report was performed. Rubber band syndrome is a very rare condition due to forgotten band around various body parts leading to complications. This condition is described in younger children with only one such known case in adults. When this band is worn for a long duration, especially during the age of rapid growth, the band penetrates through the skin and subcutaneous tissue to lie within the soft tissue with reepithelisation of skin over the band making it invisible [4]. The condition may present with a discharging sinus, scar formation or granulation tissue. Although in the majority of the cases the mechanism is accidental, the non-accidental injury must also be considered [2]. Accidental circumferential injuries of the arm, leg, finger, neck, and tongue have all been described [5]. In the current condition, the patient denied using the band, and his family mentioned that they had used a condom for him to collect urine because he had occasional hallucinations and frequent urination as adverse effects of Sinemet. Sometimes, they tried to fix the condom with an extra rubber band and probably one of them was forgotten when the condom was changed. The band began digging and burrowed into the skin that had already gotten minor slough and new skin reepithelized over it. This case highlights that old patient with difficult mobility and disturbed consciousness need special care and attention. A proper history taking can help to prevent misdiagnosis of a foreign body in the skin.

CONCLUSION

Subcutaneous rubber band foreign bodies cases in the reported area are rare. There is a need of proper history taking to prevent misdiagnosis of foreign bodies in the skin.

REFERENCES


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Nabeel K. Al-hamzawi – Substantial contributions to conception and design, Acquisition of data, Analysis and interpretation of data, Drafting the article, Revising it critically for important intellectual content, Final approval of the version to be published
Dheyaa D. Al-Khanfar – Substantial contributions to conception and design, Acquisition of data, Analysis and interpretation of data, Drafting the article, Revising it critically for important intellectual content, Final approval of the version to be published

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Authors declare no conflict of interest.
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