

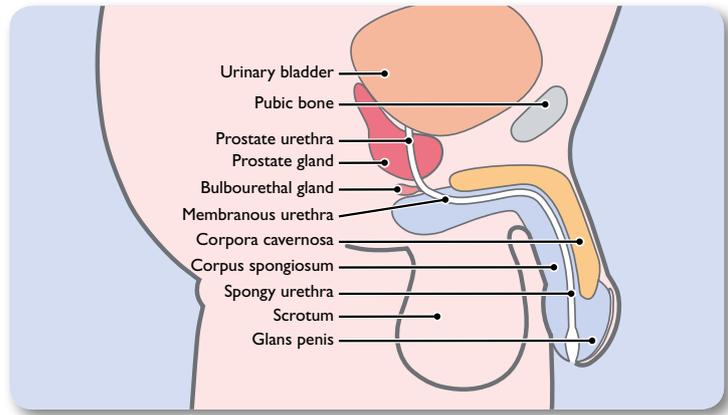


Facts about the penis

Pocket Rocket

A quick guide to penile health and penile cancer

STRUCTURE OF THE PENIS



The penis is made up of three chambers of spongy tissue that contain muscle, blood vessels and nerves. The **corpora cavernosa** makes up two of the chambers that are located on both sides of the upper part of the penis. The **corpus spongiosum** surrounds the urethra or water pipe and expands to make the **glans**.

Affectionate terms for the 'old gentleman'

Dick, cock, boner, member, tool, shaft, dong, wang, ding-a-ling, ding dong, love muscle, heat-seeking love missile, wedding tackle, bat, rod, pole, love shaft, love stick, tadger, chopper, disco stick, joystick, knob, manhood, man muscle, master of ceremonies, middle leg, one-eyed monster, one-eyed trouser snake, plonker, purple-headed soldier, tool, tripod, trouser snake, maypole, silent flute, credentials, matrimonial peacemaker, tadger, Master John Goodfellow, gentleman usher.



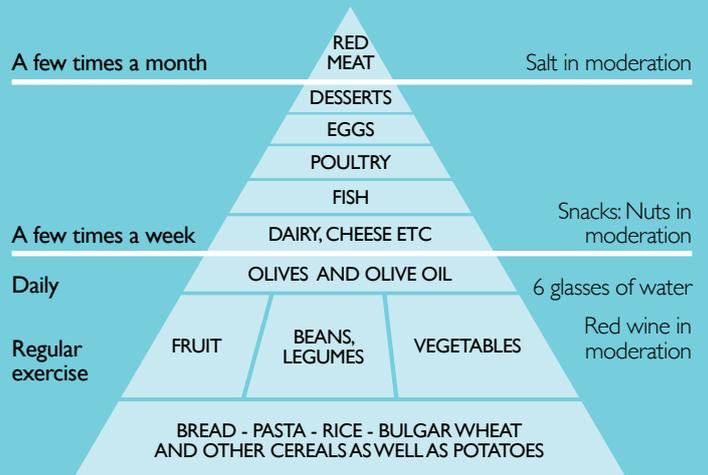
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DOES SIZE MATTER?

- The average flaccid penis measures 3-4 inches from tip to base. Most penises are the same size when erect which is actually 5-7 inches
- Smoking can shorten a man's erections
- The largest penis in the animal kingdom belongs to the blue whale and is a whopping 11 feet long, the smallest at 0.2 inches, belongs to the shrew

The Mediterranean Diet

In general, it is thought a diet similar to that consumed in **Mediterranean countries** is one of the most healthy and beneficial diets for general health and may reduce the risk of cancers such as prostate cancer. The pyramid diagram below illustrates daily, weekly and monthly recommendations for this type of balanced diet.



In addition - the following substances may offer some protection against prostate cancer; pomegranate juice, green tea (6 cups a day), processed tomatoes (found in pasta and other sauces) and oily fish.

Vitamin D - is absorbed from sunlight and may help protect the body from some types of cancer. Only 15 minutes daily is needed however and prolonged exposure to the sun can cause skin cancer.



Orchid is the UK's leading charity dedicated to supporting men and their families who are affected by male-specific cancers – testicular, prostate and penile.

Established in 1996, Orchid works to improve the lives of people affected by male cancers through a world class research programme, educational campaigns and raising awareness and an extensive support service.



Orchid has a **Male Cancer Helpline** manned by specialist nurses on **0808 802 0010** or email **helpline@orchid-cancer.org.uk**

Balanitis

This is a term used to describe inflammation of the penis, and is much more common in uncircumcised men. The glans may become swollen, red and painful and uncircumcised men may find it difficult to retract their foreskin. It can be caused by the yeast infection candida (which causes vaginal thrush in women) and bacterial infection including sexually transmitted ones (STIs). Other causes can be vigorous penile activity causing too much friction (for instance sexual intercourse) or chemical irritants from toiletries. It can be treated by using an anti-yeast cream and tablets if due to thrush or sometimes steroidal cream to reduce inflammation. In some cases antibiotics may be needed to treat STIs.

Human Papilloma Virus (HPV) and genital warts.

There are over 140 different types of HPV virus which are spread by direct skin to skin contact. Common types cause warts and verrucas. Around 40 types of HPV are transmitted via sexual intercourse. Two types of the virus; 6 and 11 are responsible for the formation of genital warts. These may appear in the form of small cauliflower shaped, pinkish growths around the penis. They can be treated with special creams and ointments or if needed frozen or burnt off using minor surgical techniques. They can appear a long time after initial infection. Unfortunately none of these treatments is a definitive cure and they may reoccur in the future. They do not cause cancer.

There are two types of HPV virus; 16 and 18 which are considered high risk viruses. These can infect the anus, penis, throat and cervix and are linked with the development of some cancers in these areas. The body's immune system is usually able to kill the virus, however sometimes in rare instances the virus can persist for many years without causing any symptoms and then develop into cancer or pre-cancerous conditions.

Practicing safe sex using a condom can help reduce the risk of HPV as well as Sexually Transmitted Infections (STIs).

Pearly Penile Papules

Around 10-20% of men may notice these small pearl like bumps which usually affect the crown of the penis. They are not infectious and do not require any treatment.

Peyronies disease

This is a rare non cancerous condition that can cause the shaft of the penis to curve due to hardened tissue forming. This may cause the penis to bend on erection and make sexual intercourse painful. It can be treated with surgical and non-surgical procedures.

HARD FACTS

- The average male orgasm lasts 6 seconds. Women get 23 seconds
- The average number of times a man will ejaculate in his lifetime: 7,200
- The average number of times a man will ejaculate from masturbation: 2,000

- The average speed of ejaculation: 28 miles per hour
- Average number of erections per day for a man: 11
- The average number of erections a man has during the night: 9

Possible risk factors for penile cancer

- ▶ Penile cancer is rare under 50 but can still affect younger men.
- ▶ Phimosis - This is the inability for a man to retract his foreskin over the head of the penis. It can occur due to minor skin inflammation (such as balanitis) or be present from birth.
- ▶ Smoking appears to increase the risk of penile cancer although it is not fully understood why.
- ▶ Having HIV can increase the risk.
- ▶ Men who have been treated with drugs called psoralens followed by ultraviolet a light therapy, abbreviated as PUVA, used to treat psoriasis are at a higher risk of penile cancer.
- ▶ Infection with two types of the HPV virus spread via sexual intercourse (see opposite); type 16 and 18, are linked to the development of some penile cancers and nearly 50% of men who are diagnosed with penile cancer will have evidence of being infected.

Melanoma - although very rare, this type of skin cancer can also affect the penis. Exposure to sunlight is not needed as skin cells can become cancerous on any part of the body.

If you have any queries regarding the information contained in this quick guide please contact the Orchid Nurses by email scotlandnurse@orchid-cancer.org.uk or phone the Orchid Male Cancer Helpline 0808 802 0010 for further information and support.

References are available on request. To be reviewed 2022.

Signs and symptoms

Cancer can develop anywhere in the penis but the most common places are on the glans or foreskin.

Men with penile cancer may experience the following signs or symptoms. However similar symptoms can also be caused by non-cancerous conditions.

- ▶ A growth or ulcer, especially on the glans or foreskin,
- ▶ Changes in the colour of the penis
- ▶ Skin thickening on the penis
- ▶ Irregular swelling at the end of the penis
- ▶ Persistent discharge with foul odour beneath the foreskin
- ▶ Blood coming from the tip of the penis or under the foreskin
- ▶ Irregular or growing bluish-brown flat lesions or marks beneath the foreskin or on the body of the penis
- ▶ Reddish, velvety rash beneath the foreskin
- ▶ Small, crusty bumps beneath the foreskin

Men who are concerned that they may have one of the above symptoms should talk to their GP.

TIPS

- ▶ Men should always practice good genital hygiene especially if they have not been circumcised. Men whose jobs may cause their hands to become dirty should always wash them before and after passing urine.
- ▶ Men who have an active sexual lifestyle with multiple sexual partners should use a condom for protection against HPV.
- ▶ Men should talk to their GP if they are experiencing difficulty retracting their foreskin.

If men are being treated for any penile condition which does not improve after a course of specified treatment they should ask their GP whether they should be referred to a hospital specialist called a urologist for further assessment.