

## Effect of severe glanular-preputial synechia on mental health

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International Journal of Science and Research Archive, 2025, 17(03), 127-129

Publication history: Received 28 October 2025; revised on 01 December 2025; accepted on 04 December 2025

Article DOI: <https://doi.org/10.30574/ijrsra.2025.17.3.3217>

### Abstract

**Background:** Male circumcision, though it is a frequently performed surgical procedure, is not free of complications. Severe glanular-preputial synechia is a widespread adhesion between the glans penis and preputial skin.

**Case Report:** A 21-year-old male who presented to our facility worried on account of the appearance of his penis. He had circumcision in childhood and a deformed penis was noticed by his parents thereafter. Clinical examination revealed a healthy looking but unhappy young male with a redundant foreskin circumferentially adhered to the glans penis resulting in disfigured stunted penis.

He had adhesiolysis and refashioning of the glans penis. The post-operative period of the patient was uneventful. He was discharged home second post-operative day.

**Conclusion:** Male circumcision (MC) is a common surgical procedure that should only be carried out by personnel with adequate relevant skills. Complications following MC should be corrected early in life. If not, it can lead to mental health challenges in the patient later.

**Keywords:** Male Circumcision; Severe Glanular-Preputial Synechia; Mental Health; Refashioning

### 1. Introduction

Male circumcision is the commonest surgical procedure performed in children and one of the highest frequently carried out surgical procedures in the world.<sup>1,2</sup> MC is performed in different parts of the world as part of religious, cultural and/or medical reasons like pathologic phimosis and recurrent balanitis.

As with any other surgeries, MC can be followed by complications. Minor complications like excessive hemorrhage and infection can be treated easily while more serious complications like trapped and severe glanular-preputial synechia (GPS) will require surgical correction.<sup>3</sup> Sometimes, irreversible complications such as decreased sexual sensation and death can occur. Reports of psychological challenges have been made in children after operations, including circumcisions.<sup>4</sup>

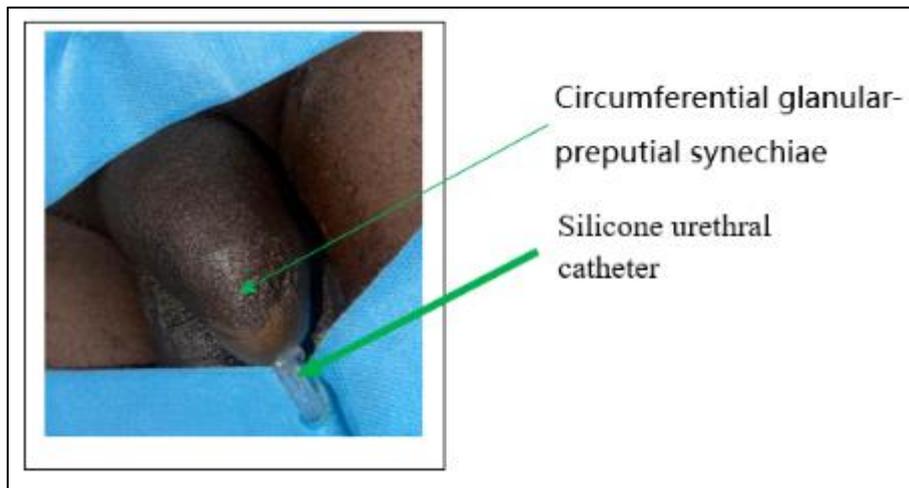
This report is not only describing one of the post circumcision complications, this case also highlights the effects of severe GPS on mental health of the patients.

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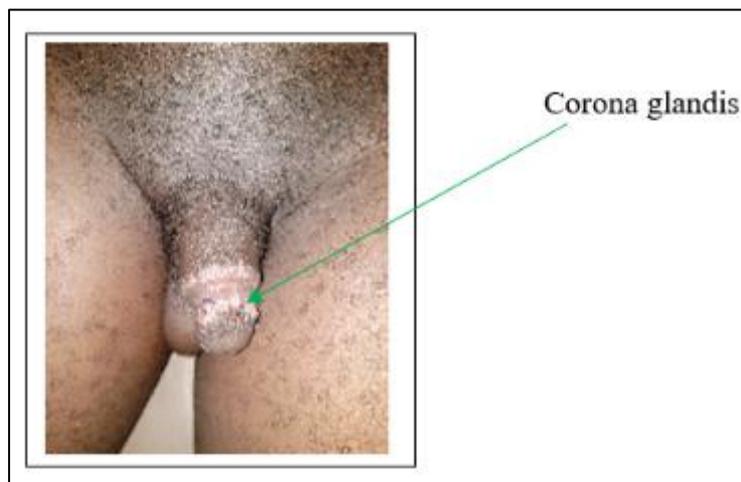
## 2. Case report

A 21-year-old male who came in to our facility so disturbed and bitter because of the appearance of his penis. He had circumcision in childhood but the parents later discovered an unusual deformity in the penis. There is no difficulty passing urine. He has no medical co-morbidities. Clinical examination revealed a healthy-looking young male but wearing an unhappy effect. External genitalia examination showed a stunted phallus with redundant foreskin circumferentially adhered to the glans penis resulting in severe disfigurement. Figure 1. The scrotum is well formed with intra-scrotal testes.

Following pre-operative work-up and informed consent, he had adhesiolysis and refashioning of the glans penis under spinal anaesthesia. Figure 2. The post-operative period was uneventful. He was discharged home second post-operative day. There was no complication during the follow-up reviews and patient is lively now.



**Figure 1** Disfigured penis from severe glanular- preputial adhesions



**Figure 2** Post adhesiolysis and reconstruction

## 3. Discussion

Male circumcision is the surgical removal of the foreskin from the penis. The commonest surgical procedure performed in children and one of the most frequently carried out surgical procedures in the world is MC.<sup>1,2</sup> In a region where MC is common, complication rate can range from 10 to 50% and a late complication rate of 7.4%.<sup>5</sup> The overall complication rate generally are expected to be 1.5%.<sup>1</sup>

Glanular-preputial adhesions is not an uncommon complication following MC. It could be a simple fibrinous adhesion which resolves with topical corticosteroid or a well-formed single or multiple skin bridges (fibrous adhesions) which requires surgical adhesiolysis.<sup>6</sup> As only about 4% of the full-term babies had a separable foreskin which glides easily over the glans penis; therefore, majority of the neonates who had circumcision will be subjected to a sort of abrasion and denudation of the glandular epithelium at the time of circumcision. The raw surface of the denudate glans will make it liable to adhere with any other adjacent raw surface resulting in an early fibrinous adhesion; which if not managed properly will result in an epithelialized skin bridge.<sup>6</sup>

Severe GPS can tether the circumcised penis during erections, causing deformity and occasionally pain.<sup>7</sup> Our patient, an adult, had circumferential GPS which led to severe penile deformity and psychological disturbance (significant unhappiness). This associated mental health challenge is similar to the case reported by Sarikaya et al.<sup>8</sup> though their patient was 13years old.

Severe GPS requires surgical intervention just like in our patient. The operation carried out is also very important in terms of cosmesis aside the functional principles. Beyond improving the aesthetic appearance of the penis, the reconstructive procedure had a significant positive impact on our patient's mental well-being.

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#### 4. Conclusion

Male circumcision is not without its risks and complications; hence, it should be performed by trained medical personnel. Formation of GPS can be prevented by careful suturing and good dressing at the time of circumcision.

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#### Compliance with ethical standards

##### *Disclosure of conflict of interest*

No conflict of interest to be disclosed.

##### *Statement of informed consent*

Informed consent was obtained from all individual participants included in the study.

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#### References

- [1] Simpson E, Cantensen J, Murphy P. Neonatal circumcision: new recommendation and implications for practice. *Mo Med.* 2014;111(3): 222 - 230.
- [2] American Academy of Pediatrics. Male circumcision, Task Force on Circumcision. *Pediatrics.* 2012; 130:e756-785. <https://doi.org/10.1542/peds.2012-1990>.
- [3] Iacob SI, Feinn RS, Sardi L. Systematic review of complications arising from male circumcision. *BJU International.* 2021; 3(2): 99-123. <https://doi.org/10.1002/bco2.123>.
- [4] Levy DM. Psychic trauma of operations in children. *Am J Dis Child.* 1945;69:7-25.
- [5] Fahmy MA. Prevalence of male circumcision complications. In *Complications in male circumcision.* Elsevier. 2019; 1:49-63.
- [6] Baky Fahmy MA, Elsayed Mohamed AH, Ali AbdAlla MFE, Nour NA. Spectrum and the management of glanular-preputial adhesions after ritual male circumcision. *BMC Urol.* 2024; 24(1):283. doi: 10.1186/s12894-024-01672-9.
- [7] Kampouroglou G, Nikas K. Penile Skin Bridges after Circumcision. *APSP J Case Rep.* 2015 ;6(3):33. PMID: 26623260.
- [8] Sarikaya S, Ozbek R, Senocak C and Bozkurtc OF. Skin Bridges That Occur After Circumcision Operation and Surgical Treatment: Case Presentation. *Mathews J Urol Nephrol.* 2017;1(1):005.