

The 10-Year Priapism Consult Experience: Identifying Clearer Targets for Priapism Intervention

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BACKGROUND

- Priapism is a urologic emergency in which prompt treatment is necessary
- Incidence of priapism in the literature ranges from 0.34 – 5.3 per 100,000 male patients¹
- A recent study evaluating US emergency department data identified an incidence of 8 encounters per 100,000 ED visits related to priapism²
- Annual costs for priapism were calculated to be over \$120 million²
- 24% readmission rates within one year from initial time of diagnosis of priapism¹

METHODS

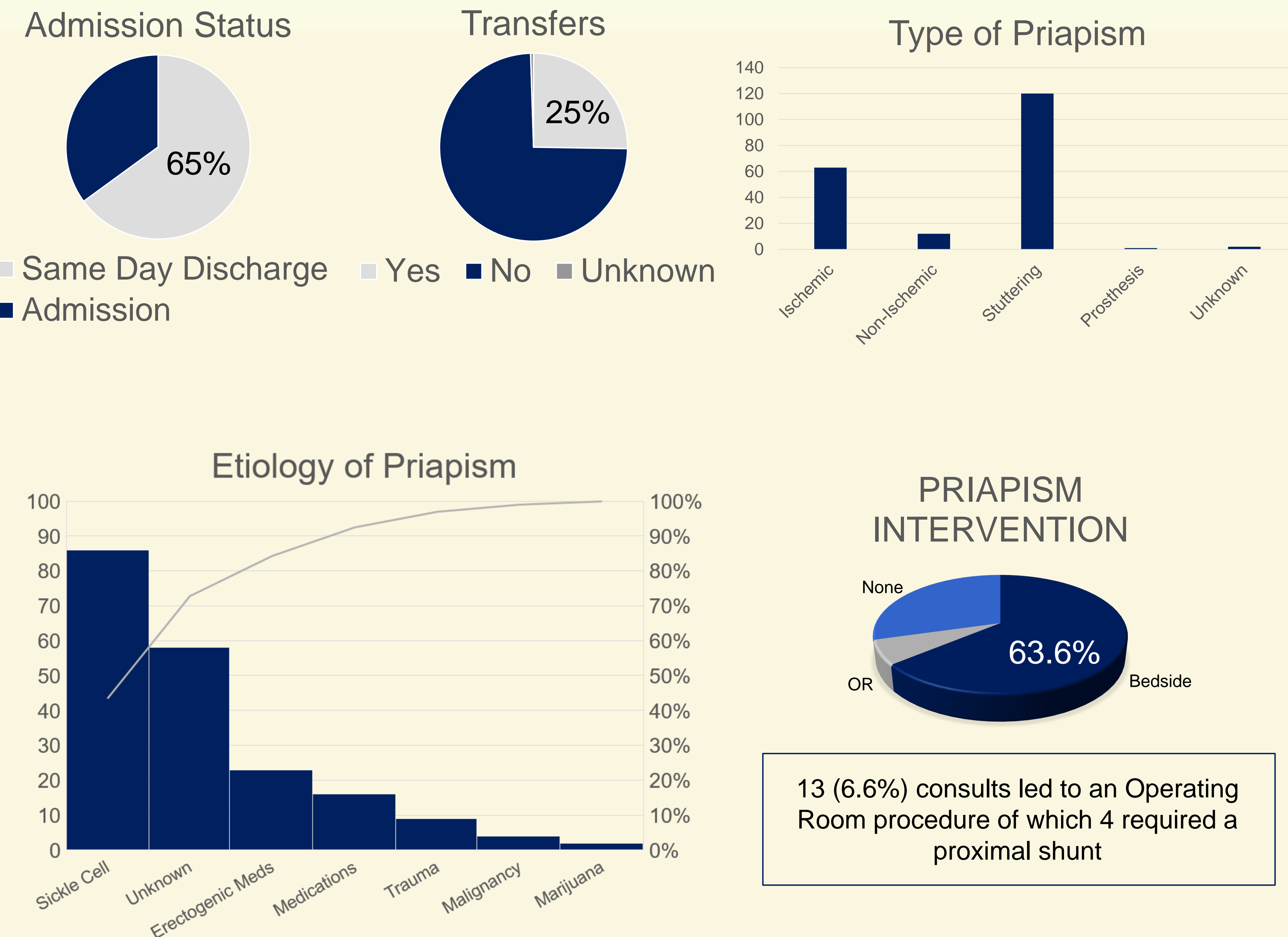
- **Data Source:** University of Michigan Department of Urology Consult Database; Information collected by residents to monitor and track Urology consults at our tertiary care center
- **Time period:** July 2008 – June 2018
- **Outcomes:**
 - Etiology of priapism
 - Duration of priapism
 - Intervention for priapism
- **Funding:** None

Sources:
1. Sui et al. Risk Factors for Priapism Readmission. J Sex Med 2016.
2. Stein et al. Nationwide emergency department visits for Priapism in the United States. J Sex Med 2013.

OBJECTIVE

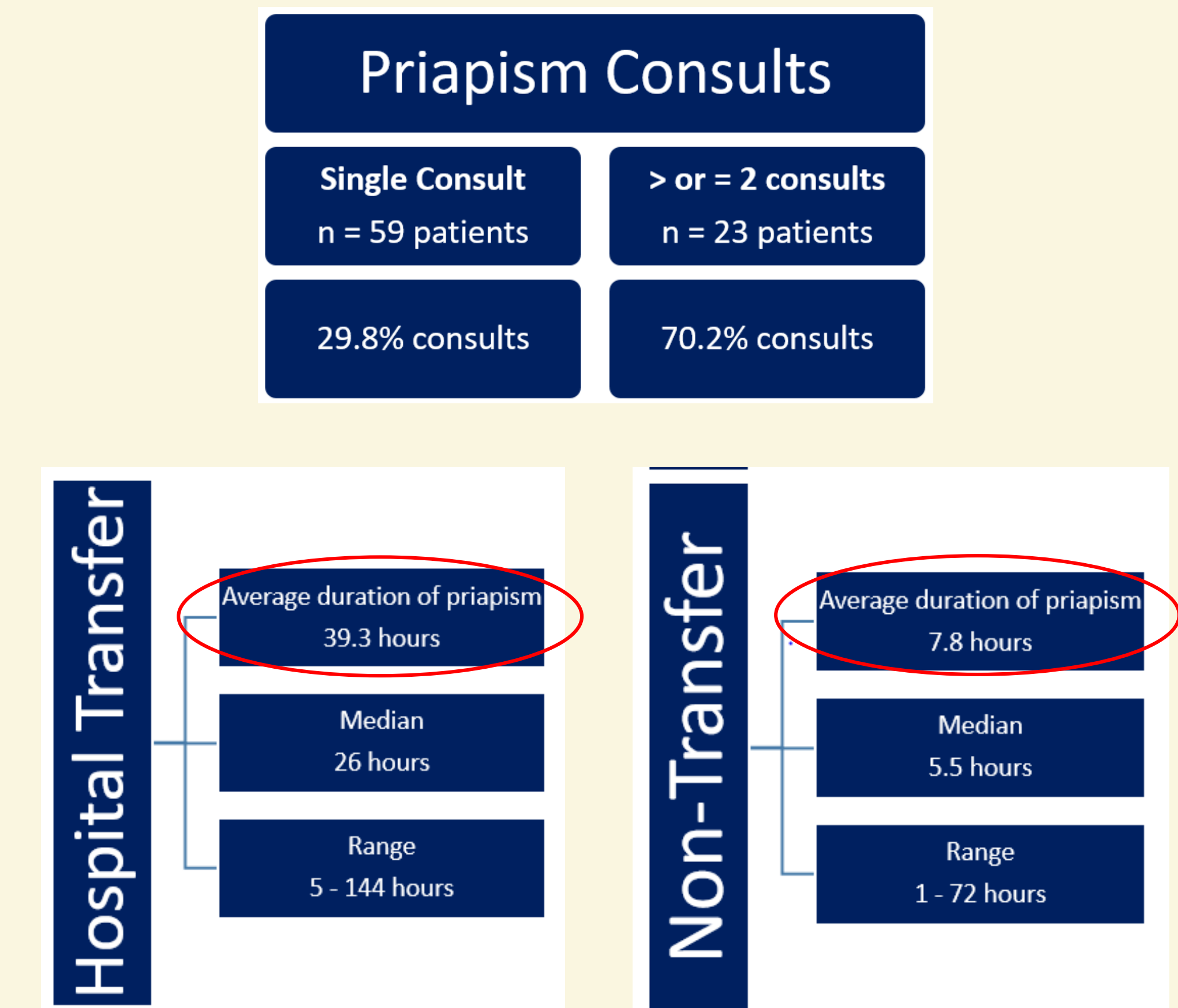
To better understand the priapism consult experience at a tertiary referral center and determine findings that may guide clinical translational efforts

RESULTS



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- N=198 consults, 82 unique patients
- Average time to presentation 15 hours (range 1 – 144 hours)
- Average age 35 years old (range 18 – 88 years)
- 11 out of 82 patients with history of sickle cell disease
- Around 75% of consults with a prior history of priapism



CONCLUSIONS

- 1) A minority of patients account for the majority of consultations indicating a need for improved outpatient management of stuttering priapism.
- 2) Timely transfer of patients from referring hospitals is another target for improvement of care as prolonged duration can lead to irreversible erectile dysfunction.