A foreign body within the foreskin of a 10-year-old boy
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Self-inserted foreign bodies in the adult male genitalia are typically the result of autoerotic activity and occasionally require removal by a urologist. In children, the problem is extremely rare and usually accidental. We present a case in which a small action figure was inserted in the foreskin of a child. A 10-year-old boy presented with a swollen red penis and a foreign body that he had inserted in the foreskin 3 h earlier. He had made several unsuccessful attempts to remove it. The foreign body was removed under general anesthesia. The variety of objects and place of insertion of foreign bodies is surprising, and removal may be quite challenging, sometimes requiring surgical intervention. Unlike in adults, for whom pleasure is the main reason for penis play, curiosity can drive young boys to insert small toys within the space of the small, stretchable foreskin. Ann Pediatr Surg 8:54–55 © 2012 Annals of Pediatric Surgery.

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Background
As children explore and interact with the world, they inevitably put foreign bodies into their mouths and sometimes swallow them. The ears and nose are easy places to insert a foreign body. Sometimes, curiosity goes beyond imagination. Insertion of items into the urethra, a habit that has been observed in adults and has been documented in numerous publications, is typically a result of autoerotic activity [1,2]. Foreign bodies are typically inserted in the external genitalia to increase sexual pleasure. In children, accidental strangulation of the penis by an object such as hair has been also described [3]. We present a case in which the foreign object was inserted neither for pleasure nor by accident.

Case presentation
A 10-year-old boy with no known physical, medical, or psychological problem presented at the emergency room complaining of penile pain and swelling; otherwise, he was fine (Fig. 1). The child had been playing in the bath when he attempted to insert a Playmobil figurine within the space of his penis, where it became stuck between his penis and foreskin. Initially, he was afraid to tell his parents and attempted but failed to remove the figurine himself. Finally, he informed his mother, who brought the child by ambulance to the pediatric emergency room. Urine retention was not observed. He had no previous medical or psychological problems. Review of other medical history did not yield any major finding.

On examination, the patient was irritable and in pain but showed no other general symptoms. Locally, the penis was irregular and deformed without clear shape. The foreskin was tense, inflamed, and shiny. A green object could be seen under the stretched foreskin; it was hard and could not be moved within the skin without inducing pain. Laceration and hematoma at the tip of the penis due to the boy’s attempts to remove the object were minimal. A preoperative investigation was not required (Fig. 2).

Treatment
The patient was admitted for removal of the foreign body under general anesthesia. Removal of the foreign body was difficult, because it was engaged within skin folds in the foreskin of the penis, mainly because of the boy’s attempts at removal. Finally, we made a 1-cm dorsal incision in the foreskin to access the foreign body. The figurine was 1 × 1 × 3 cm (Fig. 3). Although the parents consented to circumcision if needed, we simply repaired the incision without performing a circumcision.

Outcome and follow-up
Postoperatively, the child did well. The swelling decreased gradually during the first and second postsurgical days. The patient was discharged on postsurgical day 2 with instructions for follow-up wound care at the child’s pediatrician.

Fig. 1
Foreign body seen through preprutial skin.
Discussion
Bodily insertion of foreign objects is very common in children, who are merely exploring their surroundings. Insertion of a foreign body into the genitalia requires audacity or lust, which is not the case in children.

A search of the literature revealed 346 papers pertaining to a foreign body in the penis, of which just 22 cases were of children. All the papers describe a foreign body within the urethra, except some unique cases of hair-thread tourniquet syndrome of the penis. No previously published paper describes a foreign body between the foreskin and penis.

As with foreign body ingestion or aspiration, a foreign body in the penis can cause symptoms, but a child’s modesty and fear of punishment can lead a child to hide the problem from an adult.

Conclusions
(1) There is no limit to a child’s curiosity and need to explore.

(2) The foreskin can provide space for objects that can be bigger than the penis itself.
(3) Open communication between parents and child is essential to avoid complication of otherwise simple mistakes.

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Conflicts of interest
There are no conflicts of interest.

References