

Department of surgery

Glansectomy Surgery for cancer of the penis

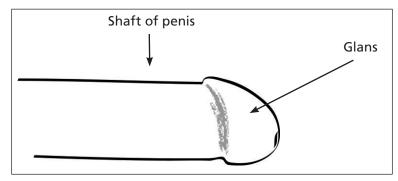


Introduction

This information is for patients who need surgery to remove the end of the penis (glansectomy) because of cancer of the penis.

What is a glansectomy?

A glansectomy involves the removal of the tissue at the end of the penis called the glans, usually in the area under the foreskin. The operation may make the penis slightly shorter than before the surgery but the basic shape will stay the same.



Sometimes the surgeon will use a skin graft, taking a thin piece of skin from the thigh, to cover the end of the penis where the cut has been made. This is not always necessary. If there is enough foreskin this can be pulled forward to cover the area. The surgeon will explain and discuss these options with you.

Agreeing to treatment

The surgeon will have explained the operation and why you need it. The information in this leaflet is a permanent record of what has been explained. We advise you to read this information leaflet before you sign the consent form.

We will ask you to sign a consent form agreeing to accept the treatment that you are being offered. The basis of the agreement is that you have had The Christie's written description of the proposed treatment and that you have been given an opportunity to discuss any concerns. You are entitled to request a second opinion from another doctor who specialises in treating this cancer. You can ask your own consultant or your GP to refer you. Your consent may be withdrawn at any time before or during this treatment. Should you decide to withdraw your consent then a member of your treating team will discuss the possible consequences with you.

What are the benefits of the operation?

The purpose of carrying out the operation is to remove the cancer on your penis. If the operation removes all the cancer then the chances of you having any further problems with cancer of the penis are less likely.

If the cancer on your penis is causing pain or discomfort then surgery to remove the cancer will stop the pain following the recovery period.

What are the risks of the operation?

There are complications that can occur after any operation. These potential risks include:

- bleeding
- chest infection
- blood clots in the lower leg (DVT or deep vein thrombosis) which could pass into the lungs (PE or pulmonary embolus). Moving around as soon as possible after your operation can help to prevent this. Also we will give you elasticated surgical stockings to wear while you are in hospital which help to prevent blood clots
- wound infection

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- poor wound healing or failure of the skin graft
- change in sensation such as the penis feeling numb or not as tender
- change in how the penis looks
- spraying of urine
- difficulty having penetrative sex
- narrowing of water passage
- the cancer coming back
- loss of length

The sensitivity at the tip of the penis will be affected although the ability to have an erection and orgasm will not usually be changed. The anxiety about the difference in how the penis looks after the operation may affect your sex life temporarily. We can offer referral for support to our psycho-oncology department here at The Christie.

Are there any alternatives to this operation?

A multidisciplinary team (MDT) of professionals including surgeons, oncologists (cancer doctors), radiologists, pathologists (scientists who examine labratory samples of body tissues) and nurses will have discussed your case before offering you this operation. It is felt that this is the best course of treatment for you. There are other treatments that we may be able to offer you, such as radiotherapy. The team may discuss these with you, if appropriate.

What will happen if I do not have the operation?

It may not be possible to offer other effective treatments as an alternative to an operation. If you do not have early treatment for the cancer then it could spread to other parts of the body. This would then make it difficult to offer any treatment likely to cure the cancer.

Admission to The Christie for your operation

About a week before the operation we will ask you to attend a pre-op assessment at The Christie. This is where a nurse practitioner or doctor will check that you are prepared for the operation. The visit will include blood tests along with an examination of your chest, heart and abdomen. We will also ask you about your general health, other previous illnesses and any medication or tablets you are taking. There will be an opportunity for you to ask questions or raise concerns at this time. You will be informed at your pre-operative assessment about any medication which you may need to stop taking before your operation.

You may be admitted the day before your surgery or the same day as your surgery. The doctor or nurse will tell you which day it will be. On the ward you will meet some of the staff who will be looking after you during your stay in hospital. The ward staff will tell you about the routine of the ward and show you round.

Before the operation we will ask you to stop eating and drinking, including chewing gum (about 4 - 6 hours beforehand). You will be able to drink water up to 2 hours before the operation.

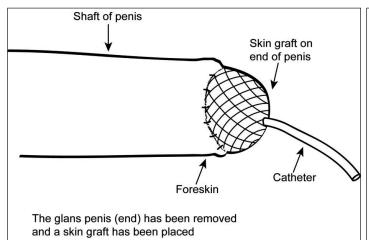
What happens during the operation?

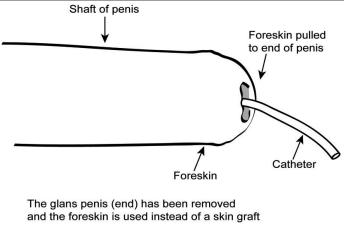
The aim of this procedure is to remove the cancer and the tissue at the top of the penis. This will take place under general anaesthetic (you are asleep). If a skin graft is used this will be taken from the upper end of the thigh. A skin graft may be required for where the tip of the penis has been removed. The graft will be taken from the upper area of the thigh and grafted to the penis using dissolvable stitches. Dressings will be used for the thigh and penis. The ward staff will arrange for the district nurse to review you.

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If a skin graft is not needed the excess skin from the foreskin will be pulled forward and stitched down to cover the tip of the penis. Again these stitches are dissolvable and will not need to be removed.

A catheter (a small soft tube) will be passed through the opening in your penis into your bladder and this will stay in place until the first part of the healing process has taken place (usually between 7 and 10 days). All your urine will be passed through this tube.





After your operation

Following the procedure you will be taken to the recovery area where staff will monitor you until you are ready to return to the ward. When you are back on the ward you will be offered something to eat and drink.

Painkillers will be offered to you on a regular basis as it is important that you feel as comfortable as possible after the operation.

If you have a skin graft, the dressing on the penis will be left in place for 7 to 10 days until it is removed to allow the doctors to check the area. The dressing on the thigh will be left in place for 7 to 10 days. You should try to keep this dressing dry while it is in place.

If there is no skin graft, the dressing on the penis will be removed the day after your operation. The catheter draining urine from your bladder will usually be taken out 7 to 10 days after the operation.

How will I feel after the operation?

After the operation you may have some discomfort around the tip of the penis. You will be prescribed regular painkillers which should ease that discomfort. For those patients who have a skin graft there will also be discomfort from the area on the thigh where the skin was taken from.

How will my body be affected by the operation?

Most patients will find that after the catheter is removed, the flow of urine is not the same since the flow may tend to spray. This is because the end of the urethra (water passage) has been cut and new skin applied around it during the operation.

The sensation at the tip of the penis will be altered but this should not affect your ability to have sexual intercourse. However, some people will find that their sex life is affected by the changes that happen after surgery to the penis. This can be distressing and may take time to come to terms with.

It may be helpful to talk to your partner about how you are feeling and any changes in your relationship. You may find it useful to speak to a counsellor or specialist nurse who can help you deal with these changes. Your GP or hospital team will be able to put you in touch with the appropriate people.

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Discharge from hospital

Your wound will be checked regularly. When we are happy that all is healing satisfactorily you will be discharged.

Arrangements will be made for district nurses to contact you and arrange visits to check that everything is healing as expected.

We will also provide you with information about how to contact The Christie Hotline number (0161 446 3658). This number is available 24 hours a day, 7 days a week and you can access help and advice when you have been discharged home.

Hygiene after surgery

You can shower or bathe once the first dressing on your penis has been removed. It is important that at first you pat the wound dry with a cloth that doesn't shed fibres.

If you have had a skin graft, the area on your thigh (the skin graft donor area) will need a waterproof covering on it when you are showering until the dressing is removed after 10 days. It is important you do not get the skin graft wet in this period, you must avoid baths and swimming pools.

Erections after surgery

Erections will usually return quite quickly after the surgery and may be uncomfortable at first but will not cause any harm to the wound. It is advisable to avoid sex for about 8 weeks following the operation.

Follow up after a glansectomy

Surgical oncology ward **0161 446 3860 or 3862**

An outpatient appointment will be made for you to attend The Christie about a month after your operation. At this appointment we will be able to discuss with you the results of the laboratory report on the cancer removed during the operation.

If any other treatment is needed this will be discussed with you at this appointment. It may be necessary to organise scans or other tests as part of the follow-up procedure. These scans will help us to check whether there has been any spread of the cancer.

After this first appointment, we will ask you to attend the outpatient department on a regular basis either every 3 or 6 months. After a period of time, if there has been no recurrence of the cancer, or if there have been no problems, the appointments will be once a year.

Contacts

If you have any general questions or concerns about your treatment, please ring the area where you are having treatment:

The Christie Hotline (24 hours a day, 7 days a week) 0161 446 3658
Your urology clinical nurse specialist is:
Phone:

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Further information

Macmillan Cancer Support

www.macmillan.org.uk 0808 808 0000 (Freephone)

Orchid National Male Cancer Helpline

www.orchid-cancer.org.uk 0808 802 0010

Relate

For counselling, therapy and relationship advice. 0161 872 0303

The Christie cancer information centres

The cancer information centres provide information and support on all aspects of cancer via a drop-in service face-to-face, over the telephone or via email. We can also signpost to other services or refer on to other professionals or voluntary organisations. We provide emotional, a listening ear and practical information to anyone affected by cancer, including relatives, carers and friends, in a relaxed and confidential environment. We also provide a hair loss support service as well as access to the wig service.

Opening hours vary depending on location so please check with the centres in advance if you are making a special journey to see us:

Withington

Phone: 0161 446 8439

Email: the-christie.informationcentre@nhs.net

Salford

Phone: 0161 918 7804

Email: salfordcancerinfo@srft.nhs.uk

Oldham

Phone: 0161 918 7745

Macclesfield

Phone: 01625 663128/663129

Counselling services at The Christie

Phone: 0161 446 8038

Benefits and finance

You may have had to stop work and had a reduction in your income. You may be able to get benefits or other financial help.

Personal Independence Payment (PIP) is a social security benefit and has replaced Disability Living Allowance (DLA) for new claimants. It's for people who need help either because of their disability or their illness. You can apply if you are aged 16 to State Pension age. You can apply for DLA if you are under 16.

If you are State Pension age or older and need help with personal care or supervision, you could be entitled to Attendance Allowance.

Your carer could get Carer's Allowance if you have substantial caring needs. Find out more today:

- To get a claim pack for Attendance Allowance, call 0800 731 0122 and for PIP call 0800 917 2222.
- For general enquiries about Carer's Allowance, call **0800 731 0297**.
- For benefits advice, contact Maggie's centre on **0161 641 4848** or email **manchester@maggies.org**
- The Christie at Oldham has a benefits advice session on Thursday afternoons, call **0161 918 7745**.

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- Contact your local social services department for help with equipment and adaptations, or for an assessment of care needs. Visit www.gov.uk for further information.
- Macmillan Cancer Support can give advice on helping with the cost of cancer, call 0808 808 00 00 or visit www.macmillan.org.uk

Living with and beyond cancer

There is information on The Christie website which aims to support people once treatment has finished. See the drop down 'Your treatment and care' and the 'Living with and Beyond Cancer' section of the website www.christie.nhs.uk

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard. If you would like to have details about the sources used please contact **the-christie.patient.information@nhs.net**

For information and advice visit the cancer information centres at Withington, Oldham, Salford or Macclesfield. Opening times can vary, please check before making a special journey.



Contact The Christie Hotline for urgent support and specialist advice

The Christie Hotline: 0161 446 3658 Open 24 hours a day, 7 days a week