

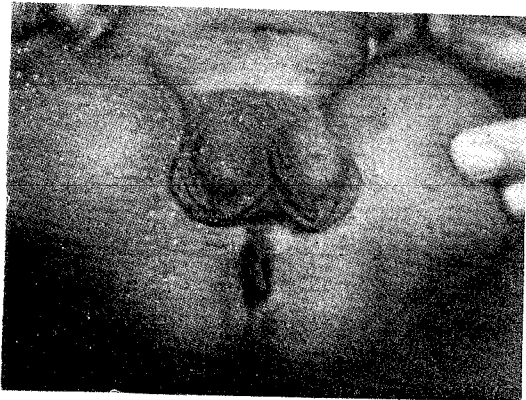
Penile Agenesis

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COMPLETE agenesis of penis is an extremely rare condition. The estimated incidence is one in 50,000 births. Approximately 37 cases have been reported. This condition must be differentiated from the rudimentary penis, concealed penis, pseudohermaphroditism, epispadias, severe hypospadias and intrauterine amputation penis.

Case reports

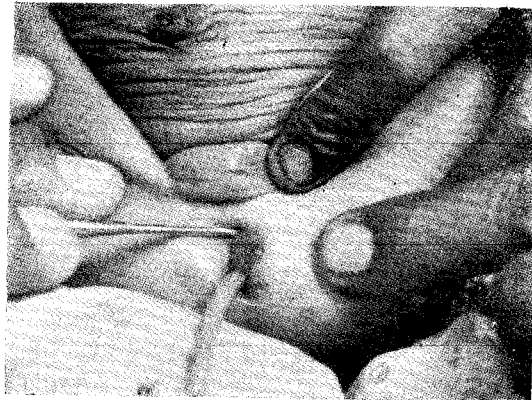
Case No. 1: G. S. was born 6 months back to a 25 years old para 1, Indian Woman. The pregnancy, labour and delivery had been uneventful. There was no family history of congenital anomalies. Examination of the child revealed complete absence of the penis, testis were present in scrotal sac, there was a small skin tag in front of the anus, but no



Case No. 1—Baby Ghanshyam

other congenital anomaly was seen. Blood urea was normal, excretory urogram was normal. The buccal smear showed male genotype.

Case No. 2 B. S. was born one and half years back to a 30 year old gravida 2, Indian woman. The pregnancy, labour and delivery had been unremarkable. There was no family history of congenital anomalies. Examination revealed complete absence of penis, testis were not present in the scrotal sac, there was a small skin tag in front of anus. The anal opening was stenosed. No other associated congenital anomaly was present.



Case No. 2—Baby Sumitra

Embryology of Penis

The sex differentiation in embryo occurs at nearly 8 weeks. Between the umbilical cord and the base of embryo, an elevation of the

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genital tubercle is formed, which forms the penis in boys and the clitoris in girls. On the ventral surface of the genital tubercle, the urethral groove appears, on either side of which lie the urethral folds. The urogenital sinus opens into the proximal portion of the urethral groove. Lateral to the urethral folds are the genital swellings, which forms the scrotum in boys and the labia majora in girls. In males the urethral folds fuse in the mid line to form the bulbous and penile urethra while in female they form the labia minora. So the congenital absence of penis is due to incomplete development of the

genital tubercle, in which case the urogenital sinus opens anterior to the anus.

Summary

This rare congenital anomaly had been reported in only 37 cases. The condition is a result of incomplete development of the genital tubercle. Other urogenital anomaly should be investigated thoroughly. The sex assignment should be done by taking into consideration the psychological aspect, hormonal and chromosomal study. The surgical interference should be done in those cases who survive infancy and childhood.

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