

## What next?

- Dressings should be kept dry for the initial 72 hours after surgery and soaked off in a bath thereafter.
- The dressing may sometimes adhere to the wound causing slight bleeding on removal. Don't panic, the bleeding will stop.
- The catheter will be removed as soon as you are awake, or if there are concerns, the following morning.
- On discharge, a prescription may be issued for patients to collect.
- Patients should schedule a follow-up appointment with Dr Schoeman 4-6 weeks after the procedure.
- There will be signs of bruising for at least 10 days.
- Refrain from using your erect penis for 3-4 weeks
- Sick leave will be granted for a few days.
- Please direct all further queries to Dr Schoeman's rooms.
- **PLEASE CONTACT THE HOSPITAL DIRECT WITH ANY POST-OPERATIVE CONCERNS AND RETURN TO THE HOSPITAL IMMEDIATELY SHOULD THERE BE ANY SIGNS OF SEPSIS.**

**Jo Schoeman**  
**FRACS, FCS (Urol) SA, MBChB**

Pelvic Medicine Centre  
St Andrews War Memorial Hospital  
Wickham Terrace  
Springhill, Brisbane QLD 4000

Ph: 07) 3831-9049  
Fax: 07) 3834-4471  
E-mail: [admin@brisbane-urology.com.au](mailto:admin@brisbane-urology.com.au)  
Emerg: 0403 044 072

# Urologist



**Dr Jo Schoeman**  
Specialist Urologist

## **PATIENT INFORMATION BROCHURE**

### ***CAUTERIZATION OF PENILE CONDYLOMATA***

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Patient well-being is my first priority!

## ***Cauterization of Penile Condylomata***

### **Why is it done?**

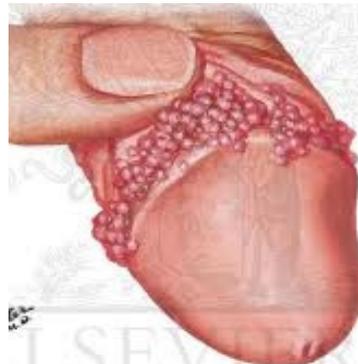
- One of the non-medical treatment options for condylomata (genital warts)

### **Pre-requirements**

- An informed consent is required from the patient.
- This can be done under a local or general anaesthetic
- If done under a GA, patients may not eat or drink from midnight the previous evening.
- Patients are to refrain from smoking before the procedure.
- **Patients allergic to IODINE/CHLORHEXIDINE should clearly state this at the Pre-admission clinic as well as to theatre staff and Dr Schoeman.**
- Any anti-coagulants such as Warfarin or Aspirin must be stopped 7 days prior to surgery. Clexane injections may be substituted.

### **How is it done?**

- This procedure is done under local or general anaesthetic.
- Supine position.
- The Foreskin may be the only affected area and therefore a circumcision is done.
- Otherwise the affected area is exposed and cleaned.
- The affected lesions are cauterized, including the root.
- Due to charring, and good hemostasis, no sutures are required.
- Hemostatic dressings are placed
- Specimen is sent to a histo-pathologist.
- A in catheter may be inserted if the biopsy area involves the meatus of your urethra.
- A dressing is then applied, which should be removed after 72 hours.
- A local anaesthetic is injected at the base of the penis as a penile block thus giving post-operative pain relief for the next 4-6 hours.



### **What to expect after the procedure?**

- **Any anaesthetic has its risks and the anaesthetist will explain such risks.**
- Bleeding is an uncommon complication.
- Eschar may loosen with vigorous use of erect penis, and could lead to bleeding.
- An infection of the wound may occur and requires immediate attention.
- **DANGER SIGNS:** A wound that swells immediately, fever, and puss. Contact Dr Schoeman or the hospital immediately as this occurs in up to 15–20% of all cases.