



[Home](#) → [Medical Encyclopedia](#) → Curvature of the penis

URL of this page: [//medlineplus.gov/ency/article/001278.htm](https://medlineplus.gov/ency/article/001278.htm)

## Curvature of the penis

Curvature of the penis is an abnormal bend in the penis that occurs during erection. In adults, it is most often due to Peyronie disease.

### Causes

In Peyronie disease, fibrous scar tissue develops in the deep tissues of the penis. The cause of this fibrous tissue is often not known. It can occur spontaneously. It can also be due to a previous injury to the penis, even one that occurred many years ago.

Fracture of the penis (injury during intercourse) can lead to this condition. Men are at higher risk for developing curvature of the penis after surgery or radiation treatment for prostate cancer.

Peyronie disease is uncommon. It affects men ages 40 and older.

Curvature of the penis can occur along with Dupuytren contracture. This is a cord-like thickening across the palm of one or both hands. It is a fairly common disorder in white men over age 50. However, only a very small number of people with Dupuytren contracture develop curvature of the penis.

Other risk factors have not been found. However, people with this condition have a certain type of immune cell marker, which indicates that it may be inherited.

Newborns may have a curvature of the penis. This may be part of an abnormality called chordee, which is different from Peyronie disease.

### Symptoms

You or your health care provider may notice an abnormal hardening of the tissue below the skin, in one area along the shaft of the penis. It may also feel like a hard lump or bump.

During erection, there may be:

- A bend in the penis, which most often begins at the area where you feel the scar tissue or hardening
- Softening of the portion of the penis beyond the area of scar tissue
- Narrowing of the penis
- Pain
- Problems with penetration or pain during intercourse

- Shortening of the penis

## Exams and Tests

The provider can diagnose curvature of the penis with a physical exam. The hard plaques can be felt with or without an erection.

The provider may give you a shot of medicine to cause an erection. Or, you may provide your provider with pictures of the erect penis for evaluation.

An ultrasound may show the scar tissue in the penis. However, this test is usually not necessary.

## Treatment

At first, you may not need treatment. Some or all of the symptoms may improve over time or may not get worse.

Treatments may include:

- Corticosteroid injections into the fibrous band of tissue.
- Potaba (a medicine taken by mouth containing aminobenzoate potassium).
- Radiation therapy.
- Shock wave lithotripsy.
- Verapamil injection (a medicine used to treat high blood pressure).
- Vitamin E.
- Collagenase clostridium histolyticum (Xiaflex) injection.

However, not all of these treatments help very much if at all. Some may also cause more scarring.

If medicine and lithotripsy do not help, and you are unable to have intercourse because of the curve of the penis, surgery may be done to correct the problem. However, some types of surgery may cause impotence. It should only be done if intercourse is impossible.

A penile prosthesis may be the best treatment choice for curvature of the penis with impotence.

## Outlook (Prognosis)

The condition can get worse and make it impossible for you to have intercourse. Impotence can also occur.

## When to Contact a Medical Professional

Contact your provider if:

- You have symptoms of curvature of the penis.
- Erections are painful.
- You have a sharp pain in the penis during intercourse, followed by swelling and bruising of the penis.

# Alternative Names

Peyronie disease

## References

Di Carlo HN, Crigger CB. Anomalies of the penis and urethra. In: Kliegman RM, St. Geme JW, Blum NJ, et al, eds. *Nelson Textbook of Pediatrics*. 22nd ed. Philadelphia, PA: Elsevier; 2025:chap 581.

Seftel AD, Yang H. Diagnosis and management of Peyronie's disease. In: Partin AW, Domochofski RR, Kavoussi LR, Peters CA, eds. *Campbell-Walsh-Wein Urology*. 12th ed. Philadelphia, PA: Elsevier; 2021:chap 73.

Virasoro R, Jordan GH, McCammon KA. Surgery for benign disorders of the penis and urethra. In: Partin AW, Domochofski RR, Kavoussi LR, Peters CA, eds. *Campbell-Walsh-Wein Urology*. 12th ed. Philadelphia, PA: Elsevier; 2021:chap 82.

## Review Date 1/1/2025

Updated by: Kelly L. Stratton, MD, FACS, Associate Professor, Department of Urology, University of Oklahoma Health Sciences Center, Oklahoma City, OK. Also reviewed by David C. Dugdale, MD, Medical Director, Brenda Conaway, Editorial Director, and the A.D.A.M. Editorial team.

Learn how to cite this page



A.D.A.M., Inc. is accredited by [URAC](#), for Health Content Provider ([www.urac.org](#)). URAC's [accreditation program](#) is an independent audit to verify that A.D.A.M. follows rigorous standards of quality and accountability. A.D.A.M. is among the first to achieve this important distinction for online health information and services. Learn more about A.D.A.M.'s [editorial policy](#), [editorial process](#), and [privacy policy](#).

The information provided herein should not be used during any medical emergency or for the diagnosis or treatment of any medical condition. A licensed medical professional should be consulted for diagnosis and treatment of any and all medical conditions. Links to other sites are provided for information only – they do not constitute endorsements of those other sites. No warranty of any kind, either expressed or implied, is made as to the accuracy, reliability, timeliness, or correctness of any translations made by a third-party service of the information provided herein into any other language. © 1997-2025 A.D.A.M., a business unit of Ebix, Inc. Any duplication or distribution of the information contained herein is strictly prohibited.

