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Self-mutilation of external genital organs in a Schizophrenic patient

Mohamed Bakhri ^{1,2,*}, Mouayad Jadouane ^{1,2}, Soufiane MELLAS ^{1,2}, Jalal Eddine EL AMMARI ^{1,2}, Mohammed Fadl TAZI ^{1,2} and Mohammed Jamal EL FASSI ^{1,2}

¹ Department of Urology, Hassan II University Hospital, Fez, Morocco.

² Faculty of Medicine, Pharmacy and Dentistry of Fez, Sidi Mohammed Ben Abdellah University, Morocco.

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Abstract

self-mutilation of genital organs is often affected in general illnesses associated with psychiatric disorders, with a highly variable clinical presentation. Management depends on the clinical presentation and stabilization of the psychiatric disorder, which implies a multidisciplinary approach.

Keywords: Self-Mutilation; Psychiatric Disorders; Penile Amputation; Testicular Amputation

1. Introduction

External genital organs are often affected in general illnesses, but psychiatric disorders are less commonly associated with such conditions. Self-mutilation of the external genital organs is rarer, given that they are among the most sensitive parts of the body. We report an exceptional case of a patient with schizophrenia who performed self-mutilation resulting in the removal of his left testicle and the avulsion of the right one, with a history of penectomy due to self-mutilation.

2. Observation

The patient is a 59-year-old man, unemployed, with no history of substance abuse. He has a past history of penile amputation nine years ago in a rural setting, which did not receive any medical intervention. He is currently under psychiatric care for schizophrenia and behavioral issues, including distrust, aggressive behavior, a tendency towards isolation, and poor adherence to treatment.

On August 2, 2024, he engaged in self-mutilation using a knife, inflicting multiple wounds to his external genital organs, resulting in the removal of the left testicle and the avulsion of the right testicle outside the scrotum (Fig. 1).

* Corresponding author: Mohamed Bakhri



Figure 1 Right testicle extruded from the scrotum, left scrotal wound, absence of penis.

The patient was admitted the same day to the operating room, where he underwent surgical debridement, reinsertion of the right testicle into its scrotal compartment (Fig. 2), and hemostatic ligation of the left spermatic cord, followed by closure of the scrotum (Fig. 3). The patient was subsequently hospitalized in the psychiatric unit for further management of his psychiatric condition.



Figure 2 Intraoperative appearance after surgical debridement and reinsertion of the right testicle into its compartment, with dissection of the left spermatic cord



Figure 3 Postoperative appearance after reinsertion of the right testicle and hemostatic ligation of the left spermatic cord



Figure 4 Image of the torn left testicle

3. Discussion

Self-mutilation is an intentional injury inflicted by an individual on a part of their own body without an apparent intent to die, according to Favazza [1]. It represents an emergency that may have implications related to sexual or gender-related suicide and thus requires coordinated management by both urologists and psychiatrists [2]. Self-mutilatory behavior is associated with various mental disorders, including intellectual disability, schizophrenia, personality disorders, and particularly borderline personality disorder [3].

Self-mutilation of the external genital organs is very rare and occurs in psychiatric conditions such as schizophrenia. It can range from burns or contusions to more severe injuries such as lacerations. Our case presents a higher degree of violence, involving the removal of the left testicle and avulsion of the right testicle.

Therapeutic management is delicate and requires coordination between urologists and psychiatrists. Antipsychotic medications often provide stabilization in emergency situations [4].

4. Conclusion

Self-mutilation of the external genital organs is a rare, terrifying, and serious manifestation that often occurs against a backdrop of psychiatric disorder. It can range from simple lacerations to the complete removal of the external genital organs. Management of such cases requires a coordinated effort between urologists and psychiatrists.

Compliance with ethical standards

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Disclosure of conflict of interest

No conflict of interest.

Statement of ethical approval

The present research work does not contain any studies performed on animals/humans' subjects by any of the authors.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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