level after removal of the gastrinoma. The levels remained within the normal range for 6 months after surgery.

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Penile Agenesis

Penile agenesis is a rare clinical entity with a reported incidence of 1 in 10 to 1 in 30 million births(1). The prognosis depends not only on the associated cardiac or renal anomalies but also on the location of the urethral opening(2). The urethral opening is either present in front of the anal opening through a skin tag or in anterior wall of anal canal. The anomaly may be due to a deficient formation of the genital tubercle or failure of development of the upper cloacal structures at and above the level of entry of the mesonephric ducts at 6 weeks of intra-uterine life. We have seen two neonates with complete absence of penis but absolutely normally developed scrotum and bilaterally descended normal sized testes (Fig. 1). The babies were passing meconium through a normally located anus, and urine through a separate opening just in front of the anus in one, and in the anterior wall of the anal canal in the other. Both babies had normal intravenous urography and renal ultrasound scans. Sex identity was established by Barr body, positive Y-chromosome and normal 46 XY karyotype.

On account of the practical problems of reconstructing a normally functioning penis, one of the option is to manage such babies by rearing them as females, after performing bilateral orchidectomy and in folding the
scrotal skin for labial reconstruction. Subsequently, vaginoplasty and estrogen therapy for normal feminine contour is required.

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