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Introduction & Objectives: Ischaemic priapism is a urological emergency with early treatment required to prevent irreversible damage to erectile function. Corporal aspiration is the first step in management. The relative infrequency of the condition means that many trainees have limited exposure to its management. Currently there are no satisfactory training models to develop skills in a controlled environment. We have therefore developed a novel training model to teach trainees the steps of penile aspiration in a safe and representative way.

Materials & Methods: An old synthetic catheterisation model was used as the basis of our priapism model. The original core of the penis was removed from this model to allow insertion of the newly devised 'corpora'. These were created by wrapping a foam core in synthetic foreskin used in circumcision models (Limbs & Things, Bristol, UK). The distal end of the foreskin was sealed. The open end of an IV giving set was embedded in to the proximal end of the foam core. An attached bag of saline, coloured with red dye, was used to provide pressurised 'blood'. A small plastic rod was also inserted into the model to allow the instructor to change the angle of the penis to simulate detumescence. The model allows repeated aspiration attempts.

Face validity of the model was assessed by experienced urologists teaching on a urology boot camp. All had managed at least 5 cases of actual priapism. Responses were reported using a 5-point Likert Scale. Data was analysed using IBM SPSS Statistics V25. Intra-class correlation was calculated using a "One-way Random model".

Results: Nine urologists participated in the evaluation. Model appearance was reported as the best simulation trait of the priapism model (Table 1). Tactile feedback from needle insertion for aspiration was also felt to be realistic with 75% reporting it as "good" or "very good". Intra-class correlation amongst experts was 0.443.

Table 1:

Face Validity	Scoring on a 5-point Likert Scale				
	1 - Very Poor (%)	Poor (%)	3 - Neutral (%)	Good (%)	5 - Very Good (%)
Appearance			11.1	88.9	
The "feel" of needle insertion for aspiration			25	62.5	12.5
The "feel" of aspiration the corpora		28.6	42.9	28.6	

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Overall ability of the model to represent a realistic simulation of the task			33.3	66.7	
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All evaluators agreed or strongly agreed that the model provided a good simulated experience that would be useful in training.

Conclusions: Our model provides a realistic simulation of corporal aspiration. It can be used repeatedly. Overall, the proposed model appears to be a promising tool for training junior doctors in the initial management of ischaemic priapism.