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Case Report

A Golden Snare: A Penile Ring Entrapment Case Report and the GEM II Solution

Dr. Kwabena Danso*

Emergency Medicine, Komfo Anokye Teaching Hospital, Kumasi, Ghana

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***Corresponding author:** Dr. Kwabena Danso, Emergency Medicine, Komfo Anokye Teaching Hospital, Kumasi, Ghana

ABSTRACT

Penile ring entrapment is an uncommon but urgent urological emergency that can result in vascular compromise, tissue damage, and obstructive urinary symptoms. This case report details the presentation of a 28-year-old male with penile swelling and urinary retention after prolonged placement of a gold ring for sexual enhancement. Conventional ring removal techniques were unsuitable due to severe edema and risk of further injury. The GEM II battery-powered ring cutter was successfully used, enabling rapid and safe removal of the ring without additional tissue damage. This case underscores the need for clinician awareness of penile ring entrapment and demonstrates the GEM II ring cutter as an effective, accessible solution for managing such emergencies and preventing serious complications.

Keywords: Ring entrapment; Urine retention; Penile ring entrapment

Introduction

Rings and ornaments are used by some individuals to improve their sexuality by placing them over/on their sex organs as commonly seen among males. Some people patronizing this act may have underlying mental health conditions[1]. When these rings are placed but fail to be removed after serving its purpose, they now become a urological emergency, diagnosed as penile ring entrapment[2]. Penile ring entrapment is characterized by features such as venous stasis, edema with or without skin ulceration, reduced lymphatic and arterial blood flow and eventual gangrene[3].

Rings placed over the male sex organ may be referred to as penis ring or cock ring or tension ring as well as constriction band. Materials used in these acts may be made of plastic whereas others use heavy metals such as gold and tungsten ring and sometimes nuts[2]. Using rings to improve the sexuality of male persons might be popular in some cultures[3], however, this is rare in my setting or there is scarce data to that effect.

Various ring removal methods have been described prior to this report. Some techniques used to remove entrapped rings include use of lubricants or soapy water; traction technique such as the string pull methods and caterpillar methods; and the rotation- based method that dates back to1940[4]. However, we write to report on the effectiveness yet simple use of the battery-powered GEM II ring cutter. The product contains different cutting discs used for cutting both simple and heavy metals as well a protective guard to prevent untoward injury to underlying skin tissue[5].

Case Presentation

A 28-year-old male was brought to the Emergency Department with inability to urinate, penile swelling and discomfort. He was accompanied by his mother who had been caring for him after sustaining spinal injury a couple of months prior presentation. He admitted to placing a gold ring over to the base of his penis to "have and maintain" an erection as his injury had impaired

him from experiencing one. He admitted to being depressed and having had thoughts of ending his life. He presented more than 72 hours after the incident and after multiple failed attempts at removing the ring. Examination at the ED showed swelling at the suprapubic region with edematous penile shaft and glans. There was a constricting band, made of gold, at the base of the penis with dorsal ulceration of the skin over the penile shaft **(Figures 1 and 2)**.

Figure 1: swollen penile shaft with ulceration and yellow metal at penile base(left); penis after metal ring has been safely removed (right).

Figure 2: picture of the ring after removal. Ring cut in two places for easy removal.

Treatment

Multiple options were considered for ring removal but were going to inflict more injury to the surrounding skin and tissue and/or would just be unsuccessful. The options included the lubricating method and compression-based techniques, both of which were impossible and would cause more injury. The decision to use the GEM II ring cutter was accepted as it had been used for finger ring entrapment without damage to skin and its use guaranteed rapid ring removal. The procedure was explained to the patient and consent sort. Patient was placed supine, area cleaned and the guard safely placed between the ring and skin with aid of water- soluble lubricant. The diamond disc cutter was mounted on the 4 AA battery- powered device and the ring was cut in 2 places for safe removal. There was immediate leak of urine via the urethra after the first cut was made. Brief pauses were made to prevent heat build and thermal burns hence avoiding further skin damage. The procedure lasted less than 6 minutes. Bedside urinalysis done and the urology and psychological teams consulted for further evaluation and care.

Discussion

The use of rings of different makes, to achieve sexual gratification is real and are sometimes, likely to get trapped over the penis and/or scrotum[3]. This is an uncommon finding in my emergency department hence not witnessed by many physicians. It is reported that some people engage is this act to enhance their sexual response, self-treatment of erectile dysfunction and because of psychiatric disturbances[1]. Penile ring entrapment is indeed a urologic emergency as is threatens the integrity of the tissue within the distal penis[1,6]. Trapping the penile base with a ring causes a series of vascular events, spanning through venous stasis, edema, reduced lymphatic and arterial flow and then gangrene[3]. The aim of this case report is to inform clinicians in my setting and others of the possibility of obstructive urinary symptoms due to ring entrapment and discuss a simple, yet efficient technique to saving the penile organ.

Conclusion

While various methods for ring removal exist, including lubrication and compression techniques, these were deemed unsuitable due to the severity of the edema and potential for further injury. The GEM II ring cutter proved to be a rapid and safe solution, preventing thermal burns and ensuring the preservation of the penile organ. This case emphasizes the importance of clinician awareness regarding penile ring entrapment as a potential cause of obstructive urinary symptoms, particularly in settings where such occurrences are rare. The GEM II ring cutter offers a simple, effective and readily available method for managing such emergencies, preventing severe complications and improving patient outcomes.

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Conflict of Interest

The author declares no conflict of interest.

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