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Chapter 7: Management of Adverse Events and Side Effects

Learning Objectives

- At the end of the session, participants should be able to:
 - Describe potential adverse events (AEs) and side effects of PrePex MC and how to manage them
 - Demonstrate appropriate recognition and decision-making skills for AEs

Side Effects vs. Adverse Events

Side Effects:

1. Oozing
2. Localized edema
3. Clear exudate
4. Slough

Adverse Events:

1. Site bleeding
2. Diffused edema
3. Diffused hematoma
4. Productive exudate
5. Incision-site infection and related symptoms

SIDE EFFECTS

Side Effect: Oozing from the Wound

- Discharge of red serum from the wound
- Usually occurs after removal (Day 7); therefore, before dressing the wound, wait to see if there is any oozing.
- Treatment:
Apply pressure; usually no further action is required.

Side Effect: Localized Edema

- Accumulation of fluid beneath the skin in the wound area
- Most common side effect (~10% of patients)
- Usually occurs 2–7 days after removal

Localized Edema: What Should the Client Do?

- No treatment necessary
- Should resolve naturally within a few days
- Explain to the client what it is and that it is common. Show him how to perform compression at home in order to diffuse the fluids.
- Recommendation: After the procedure, advise the client to elevate his penis in his underwear to prevent fluid accumulation. Advise him to keep his penis in this position until he returns for removal of the device.

Side Effect: Clear Exudate

- Discharge of clear fluid from the wound that may be seen on the dressing or underpants

Clear Exudate: What Should the Client Do?

- Wash with soap and water once a day.
- Change underwear once a day.
- If the discharge continues for three days, apply a dry dressing.

Side Effect: Slough

- White caramel-like exudate over exposed granulating tissue
- May appear on days 9–14
- Common; occurs in ~10% of patients



Slough: What Should the Client Do?

- Explain to the client that **this is not an infection** and no treatment is needed.
- Advise him to wash normally with water and soap.

ADVERSE EVENTS

Adverse Event: Site Bleeding

- Active bleeding from the wound
- Cannot be stopped by 30 seconds of direct pressure
- **Treatment:**
 - Requires sutures or other medical intervention, according to physician's decision

Adverse Event: Diffused Edema

- Accumulation of fluid beneath the skin, not limited to the wound area but seen all over the genitals (swelling of penis and scrotum)

Diffused Edema: What Should the Client Do?

- Return to the MC clinic
- Treatment:
 - Ibuprofen is most commonly used; antibiotic/other treatment may be used, according to physician's decision

Adverse Event: Productive Exudate

- Discharge of a cloudy fluid from the wound
- Consistent with more severe infections; commonly referred to as pus

Productive Exudate: What Should the Client Do?

- Return to the clinic
- **Treatment:**
 - Clean with antiseptic solution and apply a dry dressing/other, according to physician decision

Any Health Problem: What Should the Client Do?



If a client has any health problem he is concerned about, whether related to the procedure or not, he should return to the MC clinic or go to a nearby health center and inform the caregiver of his PrePex procedure.

These symptoms require medical attention:

- Fever
- Bleeding
- Severe pain
- Headache
- Dizziness

Activity 7.2

- **Activity 7.2:** Work in groups to propose solutions to the case studies provided in the participant handbook.

Summary

- Any unexpected event following PrePex circumcision shall be treated as an adverse event.
- Adverse events (AEs) are classified according to severity into mild, moderate, or severe.
- Most AEs are easily managed, not requiring referral to centers outside where the MC was performed
- AEs related to PrePex circumcision include: site bleeding, swelling, device displacement, pain, infection and disturbance of urine flow, differential desloughing of the foreskin layers

Thank you!