1. Case report:
Male aged 52, suffering from ischemic cardiopathy, who two years back underwent an angioplastic stent procedure. He takes beta blockers and nitro derivatives with a satisfactory control of the cardiovascular pathology. Three months ago, a left lateral curvature of 30º appeared along the retrocoronal sulcus of the erected penis, with moderate pain during coitus.

2. Clinical data and diagnostic analysis:
The clinical examination detects an I.P.P. nodule, similar to grain of corn, between septum and left cavernous body at the middle/distal third of the shaft. The length of the stretched penis is 15.2 cms.

A dynamic duplex sonographic scanning of the penis in full erection shows a left lateral curvature of approximately 30 degrees at middle/distal third of the shaft, at a level with a not calcificated septal nodule of 7 x 7 x 6 mm.

3. Treatment:
24 intracavernous injections of Verapamil 5 mg were prescribed over a 4-month period. Following, the application of a penis traction through a penis stretching device between 4 and 6 hours a day over a period 6 month.

4. Results
The treatment with the prescribed stretching device over 6 month allows a progressive and complete stretching of the shaft. The objective assessment after treatments end shows that the septal nodule is no more palpable, it results a penis elongation of 0.8 cms, while the stretched penis reaches a length of 16.0 cms, and the duplex sonographic scanning is no more able to distinguish the septal nodule. The follow-up after 2 years confirms a stabilization of the situation.

5. Discussion and Conclusions:
The excellent results achieved through the combined pharmacological and physiotherapic treatment to treat Peyronie’s disease within his active phase would deserve a multicentric study.