An Extremely Rare Case Report of Aphallia with Horseshoe Kidney and Ureterohydronephrosis [Letter]

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Dear editor

We read with interest the article entitled “An extremely rare case report of aphallia with horseshoe kidney and ureterohydronephrosis” by Daniel and Abera.¹ This case is special because of its rarity. However, we have some comments on this case report. Our observations mainly concern the discussion section, which is practically nonexistent, because the authors repeat the same information as in the introduction and have not properly addressed it. They argue that there are three anatomical classifications of the urethral opening: post-sphincteric, pre-sphincteric, and urethral atresia. However, the latter is not a urethral opening, but is defined as the congenital absence of the urethral orifice. Perhaps the authors were referring to the types of aphallia according to the location of the urethral meatus.² They also say that “the isolated aphallia were less likely to be identified”, which makes no sense since this anomaly, if present, is easily detected at birth. Furthermore, only one reference is included to comment on the ureterohydronephrosis found in this case. However, this association is not rare, as ureterohydronephrosis is due to the obstruction of urinary outflow and subsequent accumulation of urine, which is common in these patients.³,⁴ Finally, the authors state that aphallia has not been reported in association with horseshoe kidney, which is incorrect, as this association, like other renal anomalies, is well documented.⁵–⁷

In conclusion, we believe that these observations are important because this type of article is read by students who may receive inaccurate information.

Disclosure

The authors have no conflict of interest to declare in this communication.

References

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