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Re: Per urethral insertion of foreign body for eroticism: case reports

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To the Editor—It was a pleasure to delve into the detailed article by Mak et al,¹ published in the August 2019 issue of the *Hong Kong Medical Journal*. The accounts for the diagnosis and treatment of urethral polyembolokoilamania were comprehensive and interesting. However, to general practitioners, emergency physicians and general surgeons, anorectal polyembolokoilamania could well be the more commonly encountered problem.

We first encountered this disorder in Hong Kong in 1986 when the topic of sex, let alone object-assisted auto-eroticism, was still taboo. Some patients would rather perish than seek medical help. Gossiping about the patients' presentation was, regrettably, commonplace among the attending healthcare professionals. Unfortunately, the stigma persists: patients in recent years still display apparent uneasiness when discussing the condition, despite the more liberal social environment.

We would like to share a few lessons learned over the decades of dealing with anorectal polyembolokoilamania. First, a professional and non-judgemental attitude is of utmost importance in treatment. It ensures that patients are not deterred from seeking treatment due to stigmatism or potential embarrassment and reduces physical and emotional complications as a result of delayed treatment.

Second, for the removal of large and slippery objects from the upper rectum, we found no suitable grasping forceps among the standardised minor general surgery instruments provided. The best instrument to use is one available from basic gynaecology instrument sets: the 9" Teale Vulsellum

Forceps. This was discovered when facing great difficulty in extracting a large silicon rod from a patient's upper rectum. Ever since that experience, we have consistently resorted to this instrument and found that it had expedited subsequent procedures; including the removal of a large slippery (from lubricant used by the patient) and activated vibrator.

Author contributions

All authors contributed to the concept, acquisition and analysis of data, drafting of the article, and critical revision for important intellectual content.

Conflicts of interest

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