



West of Scotland Guideline

Approved May 2022

BALANITIS

Whats New

The links to the MCN Patient Information Leaflets about balanitis and genital hygiene have been added at the end of the guideline
There are no other changes to this guideline since last reviewed

Balanitis - inflammation of the glans

Posthitis - inflammation of the prepuce (foreskin)

Usually occur together as balanoposthitis in the uncircumcised male

It is uncommon in circumcised men.

Aims of investigation/ treatment

- : to diagnose and treat sexually transmitted infection
- to minimise sexual dysfunction
- to minimise urinary dysfunction
- to exclude penile cancer
- to treat premalignant disease.

Symptoms include:

- Rash
- Inability to retract foreskin
- Itch
- Odour
- Dyspareunia
- Dysuria

Signs include:

- Erythema
- Textural changes such as scaling or leukoplakia (pallor/plaques)
- Purpura
- Ulceration
- Fissuring
- Oedema
- Odour
- Phimosis

If associated with a generalised condition, there may be systemic features eg:

- Lymphadenopathy
- Arthritis
- General malaise
- Non-genital rash

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Investigations / Diagnosis:

- Consider subpreputial swab for *Candida spp* and bacterial culture in severe cases or where symptoms don't resolve with general hygiene measures
- If candidal infection is present, refer to GP to exclude diabetes
- PCR for *Herpes simplex*/Syphilis if ulceration present (In addition to serology for syphilis)
- Testing for sexually transmitted infections if appropriate
- Refer for biopsy if a pre-malignant or malignant condition is suspected

Range of factors causing balanitis

Infectious	Dermatoses	Miscellaneous
Candida albicans	Lichen sclerosus	Trauma
Trichomonas vaginalis	Plasma Cell (Zoon's) balanitis	Irritant e.g. soaps, shower gels
Streptococci	Circinate balanitis	Poor hygiene
Anaerobes	Psoriasis/eczema	Penile intra-epithelial neoplasia
Gardnerella vaginalis	Lichen planus	
Staphylococcus aureus	Contact allergy e.g. soaps, detergents	
Mycobacteria	Immuno-bullous disorders	
Entamoeba histolytica	Fixed drug eruption	
Syphilis	Stevens-Johnson Syndrome	
Herpes simplex virus		
Human papillomavirus		



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Management

Where a specific cause is identified management should follow the relevant guideline.

General advice:

- Salt water bathing in addition to hygiene advice
- Avoid soaps when inflammation is present. Soap substitutes include aqueous cream, E45, Dermol, Hydromol, Zerobase
- Oil based creams may affect condom efficacy
- Avoid possible irritants e.g. baby wipes, shower gels, lubricants, hygiene sprays
- Consider a trial of hypo-allergenic condoms if client uses condoms
- If symptoms fail to resolve, consider referring on to senior GU colleague or dermatology for review. A trial of mild topical steroid may be considered.

References

BASHH UK National Guideline on the management of balanoposthitis, 2008 (accessed online May 2022).

Patient Information Leaflet

[West-of-Scotland-Balanitis-Leaflet-Final-3.1-August-21.pdf](#)

[West-of-Scotland-Genital-Hygiene-PIL-Final-3.1-August-2021.pdf](#)

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