



PAEDIATRIC ACUTE CARE GUIDELINE

Balanitis

Scope (Staff):	All Emergency Department Clinicians
Scope (Area):	Emergency Department

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Balanitis

Balanitis is a irritation and inflammation of the foreskin and glans, often associated with poor hygiene. There is usually an infective component to the condition, and there may be an associated nappy rash.

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Background

- Incidence 4%
- Usually seen in boys less than 4 years

Assessment

- Mild to severe swelling of the foreskin and glans
- Erythema

Investigations

- No investigations are required

Differential diagnoses

- Paraphimosis

Management

Initial management

If the patient is still **able** to void urine:

- Oral antibiotics – Cephalexin or co-trimoxazole (e.g. Bactrim)
- Chloromycetin ointment topically 3 times a day (Bactroban is a reasonable alternative)
- Twice daily salt baths
- Referral to Surgical Outpatients **only** if recurrent episodes

If the patient is **unable** to void urine:

- Refer to Paediatric Surgical Team
- If the bladder is full, consider “in-out” urinary catheterisation to empty bladder. Try to avoid an indwelling catheter if possible.
- IV or oral antibiotics
- Twice daily salt baths

Medications

- [Analgesia](#)
- [Antibiotics](#)

Referrals and follow-up


- If doubt exists about the diagnosis of balanitis, or there is paraphimosis, seek an urgent surgical opinion.

Tags

balanitis, foreskin, glans, inflammation, inflammation, nappy, paraphimosis, penis, rash, urine, void

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