

Supplementary material has been published as submitted. It has not been copyedited, or typeset by Acta Dermato-Venereologica

Fig. S1. Serial intraoperative findings. Serial intraoperative photographs demonstrating inversion of the inner prepuce completely covering the glans. Incision and eversion of the thin membranous structure resulted in exposure of the previously inverted glans. A focal depression was observed near the base of the tumor. No findings suggestive of preputial orifice obstruction caused by the tumor were identified. Red arrowheads indicate the base of the tumor.

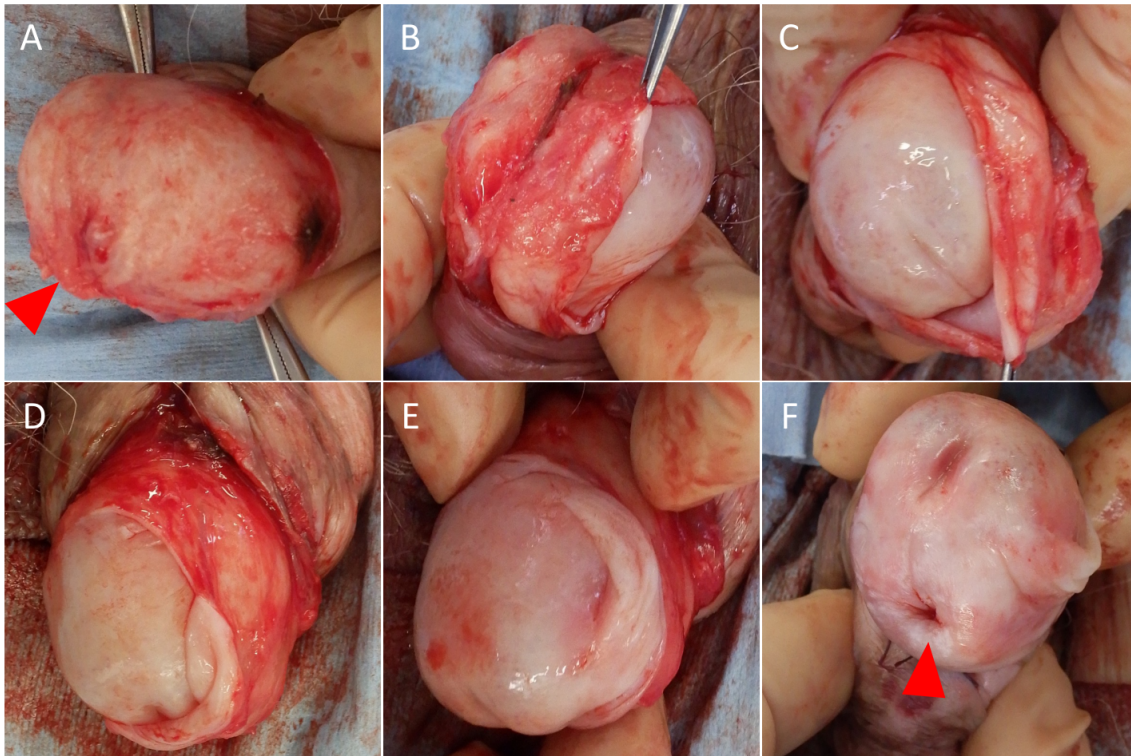


Fig. S2. Schematic illustration of the proposed mechanism by which persistent traction from a pedunculated preputial tumor leads to glans inversion and preputial narrowing. A: Early stage, showing the appearance of a pedunculated tumor on the outer prepuce. **B:** Preoperative stage. Progressive enlargement of the tumor results in persistent mechanical traction, causing inversion of the glans and inner prepuce; chronic inflammation and cicatricial contraction lead to a pinhole-shaped preputial orifice. **C:** Intraoperative stage, illustrating the lines of tumor excision and preputial incision (corresponding to Figure 1D).

