



THE THINGS WE DO

FOR LOVE



DICK TOO SMALL? TOO THIN? TOO LUMPY? DR. JAMES ELIST HAS THE FIX FOR YOU.

“ALL MEN ARE CREATED EQUAL,” at least according to our Founding Fathers, who stated unequivocally in the Declaration of Independence that all men are equally “endowed by their Creator.”

Unfortunately, when it comes to male endowment, that’s not always the case. The Almighty has made some penises way too small, others too narrow. He’s given some men grossly misshapen testicles; others birth defects that have made their manly equipment so unsightly, it rivals an extraterrestrial from a horror movie.

Up until a few decades ago a guy with a deformed or nonfunctioning penis had just two choices: Live with it or go the Ernest Hemingway route. It was rumored that the literary poster boy for machismo blew himself away with a 12-gauge shotgun after discovering that his joy daddy had permanently gone limp.

For many men, sex is life. Period. Which is why for some guys, Dr. James Elist has been a genuine lifesaver.

“I felt like a giant weight was on me all the time,” sums up one patient. “I couldn’t function sexually. I couldn’t be normal. I started to think that maybe I couldn’t go on anymore.”

Such was the case with “Paolo,” 25, a tall, well-built Brazilian blessed with soap opera good looks. Meeting the advertising executive, you’d assume he’s on top of the world, as well as regularly on top of a parade of hot women. But Paolo has a terrible secret.

“My penis has always been of normal length,” he explained candidly. “My problem has been abnormally small girth. I knew something was wrong as soon as I hit puberty.”

“Pencil dick” is a taunt boys may hear around seventh grade. But poor Paolo was actually born with one, making his teen life a living hell. As an adult, he had to deal with girls saying things to him like, “This is the smallest penis I’ve ever seen.” Or worse, just plain laughing in his face.

Paolo stopped trying to date. Instead, he began looking for a solu-

tion. Scouring the Brazilian medical community, all he found was a variety of options that sounded like modern-day snake oil: fat injections directly into the penis, painful stretching exercises, weird skin grafts. Ultimately, Paolo’s years of futility led him to realize that no doctor in Brazil could help him.

Thank God for American ingenuity! Nowadays we’re not just building better cars and trucks; we’re at the forefront of penis-enlargement and penis-enhancement technology, primarily due to the work of one man.

A near-suicidal Paolo learned about Dr. James Elist while surfing the Web. On one site he found postings from grateful patients with stories similar to his.

Paolo flew to California and had his case reviewed by Dr. Elist, a Beverly Hills urologist who specializes in infertility, impotency and genital reconstructive surgery. Although he continues to treat patients with traditional disorders, most of his practice is devoted to penis enhancement, an area of expertise in which he accidentally became a pioneer.

When Elist was a student in the late 1970s, the mainstream medical community primarily focused on the physical factors causing impotence: namely diabetes, alcohol or drug abuse, vascular disease, surgery or injury affecting the pelvic area or spinal cord, birth defects and a variety of chronic medical conditions. Treatment fell into two major categories: medical intervention and surgical intervention. The first category was often about diet, exercise, drug therapy or medications; the second, penile implants.

“It was relatively new, and my medical professor actually discouraged the implant procedure,” Dr. Elist remembered. “He didn’t think the inability to have sex was that traumatic.”

But Dr. Elist did. He observed time and time again that a penile prosthesis (now available either in a permanent, semirigid, bendable form or a deluxe inflatable model) not only fixed the sexual function issue, it markedly improved a patient’s entire outlook. In his words: “After the procedure, even the way they walked into the office was different.”

When Elist became a licensed urologist, he had the wherewithal to help a lot of people—but far from everyone. Many birth defects and vascular issues couldn’t be sufficiently corrected.

Then there was the separate issue of patients with body dysmorphic syndrome, an

anxiety disorder triggered by excessive concern about a perceived defect in one’s physical features. *Perceived.* And that’s where it gets tricky.

Take Paolo’s case. His lanky baloney pony wasn’t killing him. From a medical point of view, it was 100% functional, meaning the dude could live to be a hundred with a pencil dick and father as many kids as he saw fit. But Paolo and plenty of men like him were genuinely miserable because of what they perceived to be a bodily defect.

As a knowledgeable and compassionate healer, Dr. Elist wanted to help. Collaborating with plastic surgeons, he focused on dermal grafts and fat injections only to

couldn’t possibly leak), did some animal research and cadaver studies, then submitted his plans to the FDA for approval. The Elist Silicone Block was okayed in 2002 and is the only implant of its type to be green-lighted by the FDA. (The regulatory agency also approved the aforementioned gel-filled silicone breast implants in 2006.)

Dr. Elist could now significantly increase the girth and length of a penis with a permanent, totally safe, FDA-approved prosthesis that takes less than an hour to insert. Needless to say, the response from patients was positive.

“It’s the best investment a guy can make,” said “James,” a 47-year-old dentist from Portland, Oregon, who had a length-and-girth-enhancement procedure about a year ago. “For me, it wasn’t about being able to satisfy my girlfriend. I had it done because of my own perception [there’s that dysmorphia again], my own insecurity. Now it feels good. My function is better, and my confidence is much better.”



PHOTOS BY M. ALLEN NATHAN

encounter the same complications as others who had already gone down this path: scar tissue, transplant rejection and overall non-permanent, unimpressive results.

Cut to the year 2000. After years of controversy, silicone breast implants were on the verge of a comeback. Studies indicated that two manufacturers’ new-and-improved gel-filled implants were free of health or safety issues.

That’s when Dr. Elist had a brainstorm. If the material was finally safe for breast augmentation, it might work for the penis as well. He devised a semisoft dermal silicone graft (even safer than a gel because this stuff

Confidence. I spoke to several of Dr. Elist’s patients, and the word came up every single time. Before the procedure, to varying degrees, they basically shared the same sentiment: *I just didn’t feel good about myself.* And after the procedure they all had the same response: *Life is much better.* As James pointed out to me, “Dr. Elist goes to great pains to make sure his patients understand that the surgery doesn’t create a magical transformation.”

The doctor insists that all his enhancement patients undergo an extensive psychological evaluation before any procedure. He explained that “if a patient is unhappy to begin with—

troubled with other issues—he's still going to be unhappy after the surgery. I actively discourage surgery if it isn't necessary."

Although Dr. Elist isn't interested in creating an army of overly endowed Frankenschlongs, nothing makes him happier than treating an appropriate candidate. The urologist's face beamed with pride as he described his life's work: "My patients love it. It's like they have a million-dollar line of credit in the bank." It's amazingly gratifying for him to watch someone who, after years of suffering, suddenly has, in his words, "no limitations."

So there's really one question left. The *big* question, of course. To demonstrate exactly what he could install under the ol' manhood, Dr. Elist invited me to observe an upcoming surgical procedure.

Three days later I was looking at "George," a guy in his mid-30s. I didn't officially meet him just then, because he was lying unconscious on an operating table with a sheet covering his face. I was only introduced to the patient's penis, which was exposed and prepped for surgery.

I'm no connoisseur of the male organ, but over the years (strictly in a manly, heterosexual context), I've seen my share. George's pecker looked okay to me. I wouldn't have thought he was a porn star, but I also wouldn't have imagined he'd be afraid to let it all hang out at the appropriate moment.

Dr. Elist explained that George's story was somewhat complicated. Upon closer (and mildly homophobic) examination, I saw some bumps on his member and a strange scar above his pubic hair line. It turns out that George had undergone a potpourri of penis-enhancement procedures over the years. He had received fat injections and a dermal graft, and a surgeon had cut the suspensory ligament in an attempt to make his penis stick out farther. As a result, it was now a mess.

A nurse called out the exact moment the first incision was made: "11:45 cutting time." I assumed it was for some legal reason, although



the announcement only made me want to hurl my breakfast into my surgical mask. I'm the kind of guy who squirms when I even hear a story about someone getting kicked in the groin. To watch someone get his penis sliced open like a pickle on a deli tray was one of the most disturbing events I've ever witnessed, and I've worked for HUSTLER for a while.

But science trumped squeamishness. The operation was just plain amazing. Dr. Elist started off by peeling back the skin and deftly removing what looked like a gooey, bloody mass about the size of a half dollar—"scar tissue" from previous surgeries. Then he spent the next half hour repairing internal vascular damage. Once that was done, the doctor called for the pièce de résistance, his patented Elist Silicone Block.

The implant looks like two unremarkable white strips of silicone, each about as thick as three strands of cooked spaghetti (although not as pliable), which the doctor quickly attached to each side of the penis's interior. Next, the skin of the organ was stitched back up—on the inside so as not to leave any visible scarring—then carefully stretched over the flaccid, now-in-place implant.

Voilà. There it was. A pretty damn cool-looking penis, I must admit (again slightly homophobically), with virtually no discernible scars or stitches. "Beautiful," the anesthesiologist remarked. Everyone else on the operating team nodded their heads in agreement while Dr. Elist measured his handiwork with a tape measure. "Nearly two inches instantly more in girth," he proudly announced. "With time he should gain over an inch in length as well. Maybe more." He put down the tape measure and asked, "What do you think?"

"I think," I replied with utter certainty, "that when he wakes up, he's going to be one happy guy."

Depending on what you want done, prices start under \$10,000. The patient goes home within a few hours, is on painkillers for a couple of days and must take it easy for six to eight weeks. (Translation: no pussy or choking the chicken.) Then he's good to go. And go. And go. No additional maintenance required.

I asked Paolo if he was nervous about his upcoming operation. "Absolutely not," he replied without any hesitation. "I've waited a long time for this. I'm anxious to move forward with the rest of my life."

When Paolo wakes up, I'm sure he's going to be one happy guy as well.

For more information on Dr. James Elist's various groundbreaking procedures and the Beverly Hills Male Enhancement Center, visit Surgeon4men.com.

Disclaimer: The ideas expressed in this article are strictly those of the author, are for information and entertainment purposes only and do not constitute medical advice of any kind.



"That carved dildo was used by Nina Hartley in the first 'talkie' porno done in 1928!"