LONGTERM INTRACAVERNOUS (IC) THERAPY RESPONDERS CAN POTENTIALLY SWITCH TO SILDENAFIL CITRATE AFTER RADICAL PROSTATECTOMY (RP)

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To assess whether longterm users of IC injections after RP can switch to oral therapy with sildenafil citrate. Thirty-six patients (mean age 60.9 yrs) with erectile dysfunction (ED) following RP were identified as longterm users of IC injection (mean 2.5 yrs). Prostaglandin (PG) E1 was used in 61% and Trimex solution (PGE1, papavarine, phentolamine) in the remaining 39%. The abridged 5-item International Index of Erectile Function (IIEF) questionnaire was used to assess the outcome with IC. These 36 patients received open label sildenafil orally (50-100mg) for a minimum of 5 attempts. Following sildenafil use, patients were assessed with the abridged IIEF, partner satisfaction, and compliance to therapy. Of the 36 patients, 41% (15/36) successfully switched to sildenafil and discontinued IC injection. Thirty-eight percent (14/36) found sildenafil ineffective and remained on IC injection. Nineteen percent (7/36) found sildenafil alone to be suboptimal but continued using it, enhancing the efficacy of IC injections alone. Longterm users of IC injection therapy can potentially switch to sildenafil citrate with acceptable sexual satisfaction. Some longterm IC users (20%) can enhance sexual satisfaction with the addition of sildenafil citrate.