DEFINING ERECTILE DYSFUNCTION (ED) AND TREATMENT PATHWAYS FOLLOWING RADICAL PROSTATECTOMY (RP) IN A PREOPERATIVE SEXUALLY ACTIVE POPULATION

R. Raina, A. Agarwal, K. Goyal, C. Zippe, Cleveland Clinic Foundation

To determine the erectile status, treatment choices, and outcomes of sexually active patients following nerve sparing (NS) and non-nerve sparing (NNS) radical prostatectomy (RP). A review of a single surgical series (1997-2000) identified 176 sexually active patients who underwent NS or NNS RP. All patients were indexed at least 12 months after their surgery. The patients received regular follow-up at 6-9 month intervals. The patients were questioned regarding their erectile status at each visit and were offered standard treatment options [i.e., vacuum constriction device (VCD), intracavernous injection (IC), or medicated urethral system for erections (MUSE)].

The erectile status and efficacy of the various treatments for erectile dysfunction (ED) following RP were assessed by the SHIM (IIEF-5) questionnaire. Sildenafil citrate was offered to all patients regardless of their previous therapy or erectile status. A sexually active population of 176 patients (mean age 61 years) underwent NS RP [112/176 (63.6%)] and NNS RP [64/176 (36.3%)]. Though 42% (74/176) of patients regained spontaneous erections [61% (69/112) NS, 8% (5/64) NNS] sufficient for successful vaginal intercourse at a mean follow-up of 18 months from surgery, 71% (52/74) of these patients were dissatisfied with the quality of erections and sought adjuvant treatment. Severe ED after RP was observed in 58% (102/176) patients. Though 43% (44/102) of the severe ED patients postoperatively attempted standard treatments (IC, MUSE, and VCD), no post-surgical therapy was sought by 57% (58/102). When offered sildenafil citrate, 42% (24/58) of the patients in the no-treatment subgroup tried treatments for ED for the first time. In the patients already taking standard treatments, 57.6% (25/44) switched to sildenafil citrate when it was offered. While 42% of the patients regain erectile function after RP, 71% of this group sought adjuvant treatments to enhance their quality of erections. Nearly 57% of the patients with ED after RP did not seek any treatment. However, 1/3 of these patients sought treatment for the first time when offered oral therapy.