COMPARISON OF THE EFFICACY OF SILDENAFIL CITRATE TADALAFIL AND VARDENAFIL FOR THE TREATMENT OF ERECTILE DYSFUNCTION (ED) AFTER RADICAL PROSTATECTOMY (RP)
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In this prospective study, 23 men with ED after nerve–sparing (NS) RP who had responded to 100mg of sildenafil were given 20mg tadalafil for 5 weeks, then 20mg vardenafil for 5 weeks. After 5 weeks of each phosphodiestersase 5 (PDE5) inhibitor, patients had a 1-week washout period without a PDE5 inhibitor. 20/23 patients completed 20mg tadalafil for 5 weeks and 13 patients completed 20mg vardenafil for 5 weeks, an additional 10 patients completed both 20-mg of tadalafil for 5 weeks and 20mg of vardenafil for 5 weeks. After 5 weeks of each PDE5 inhibitor, each patient completed a SHIM questionnaire, a rigidity score, and a side effects profile measuring frequency, duration, and severity of side effects. Of the 23 patients, 20/23 (87%) patients completed 20mg of tadalafil for 5 weeks, 3/23 (13%) patients discontinued use of tadalafil due to side effects with a mean SHIM score for tadalafil of 18.7 [vs. sildenafil (n = 20) 19.85]. In comparing individual SHIM scores 6/20 had greater sildenafil SHIM scores, 2/20 had greater tadalafil SHIM scores, and 12/20 had equal SHIM scores. Of the 23 patients, 13/23 (57%) patients completed 20mg of vardenafil for 5 weeks, 0/13 discontinued use because of side effects, with a mean SHIM score for vardenafil of 19.53 [vs. sildenafil (n = 13) 19.85]. In comparing individual SHIM scores 2/13 had greater sildenafil SHIM scores, 2/12 had greater vardenafil scores, and 9/12 had equal SHIM scores. Ten patients completed both 20mg of tadalafil for 5 weeks and 20mg of vardenafil for 5 weeks, with mean SHIM scores for tadalafil of 18.2 and vardenafil of 19.9 [verse sildenafil (n = 10) 20.3]. Based on SHIM scores, sildenafil, tadalafil, and vardenafil, are an equally efficacious treatment in patients with ED following NS RP.