ERECTILE DYSFUNCTION (ED) FOLLOWING RADICAL PROSTATECTOMY (RP) IN A PREOPERATIVE SEXUALLY ACTIVE POPULATION: CLEVELAND CLINIC SERIES

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Objective: To determine the erectile status, treatment option choices, and outcomes of patients following Radical prostatectomy.

Design:

Materials/Methods: A review of a single surgical series (1997-2000) identified 176 sexually active patients who underwent nerve sparing (NS) or non nerve-sparing (non-NS) radical prostatectomy. All patients were indexed at least twelve months after their surgery. The patients received regular follow-up at 6-to-9 month intervals. The patients were questioned regarding their erectile status at each visit and standard treatment options like VCD (vacuum constriction device), Intracavernous Injection (IC) or medicated urethral system for erections (MUSE) were offered. With the introduction of sildenafil citrate, it was offered to all patients regardless of their previous therapy of erectile status. At each visit, therapy for erectile dysfunction was modulated to achieve the maximum patient satisfaction.

Results: A sexually active population of 176 patients, of mean age 63 years, underwent nerve sparing (NS) 112/176 (63.6%) and 64/176 non-NS (36.3%) radical prostatectomy (RP). Though 18% (32 of 176) patients regained spontaneous erections (34% NS, 4% non-NS) sufficient for successful vaginal intercourse after surgery, 78% (25 of 32) patients were dissatisfied with the quality of erections and sought adjuvant treatment. Erectile dysfunction (ED) after radical prostatectomy was observed in 82% (138 of 176) patients. Though 43% (59 of 138) of the ED patients postoperatively attempted standard treatments (IC penile injections, MUSE, and VCD), no adjuvant therapy was sought by 57% (79 of 138) patients. With the introduction of oral therapy with sildenafil citrate, 42%(33 of 79) of the patients in the no-treatment subgroup tried treatments for erectile dysfunction for the first time. In the patients who were already taking standard treatments, 57.6% (34 of 59) patients switched to sildenafil citrate when it was offered as an option.

Conclusions: While 18% of the patients regain erectile function after radical prostatectomy, nearly three fourth seek adjuvant treatments to enhance their quality of erections. Though sexually active preoperatively, nearly 57% of the patients with erectile dysfunction after radical prostatectomy did not seek any treatment. However, with the introduction of oral therapy with sildenafil citrate, one third of the patients were encouraged to try treatment for the first time.

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