EARLY MUSE TREATMENT AFTER RADICAL PROSTATECTOMY FACILITATES SEXUAL ACTIVITY
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Early use of MUSE after radical prostatectomy (RP) may potentially regain early erections and facilitate sexual activity. Following nerve sparing RP and catheter removal (avg. 3-10 days), 56 patients with mean age of 58.6+5.8 yrs. [PSA < 10, Gs ≤ 6, stage T1-T2 and baseline total IIEF-5 >16] undergoing nerve-sparing RP were chosen to use a 125 mcg dose of MUSE 3 times/wk. Early use of MUSE began on average of 3.5 weeks after RP. The treatment efficacy was analyzed by responses to Sexual Health Inventory for Men (SHIM) questionnaire. The minimal follow-up period was 19 months. All patients experienced erectile dysfunction (ED) after their surgery. Of the 38 patients, 28 or 74% of patients reported improvements in all five domains of SHIM. The mean pre-surgery SHIM score in these patients was 21.14 ± 3.22, which decreased to 6.2 ± 2.90 after surgery and increased to 13.18 ± 3.07 (P<0.05) after MUSE. Fifteen of the 38 patients (40%) with a mean SHIM score of 18.92 ±2.27 were able to maintain erections sufficient for sexual intercourse. MUSE treatment after RP is safe and tolerable and can be used to promote vascular perfusion of the corpus cavernosum.