LA DISFUNZIONE ERETTILE
Un problema non solo maschile

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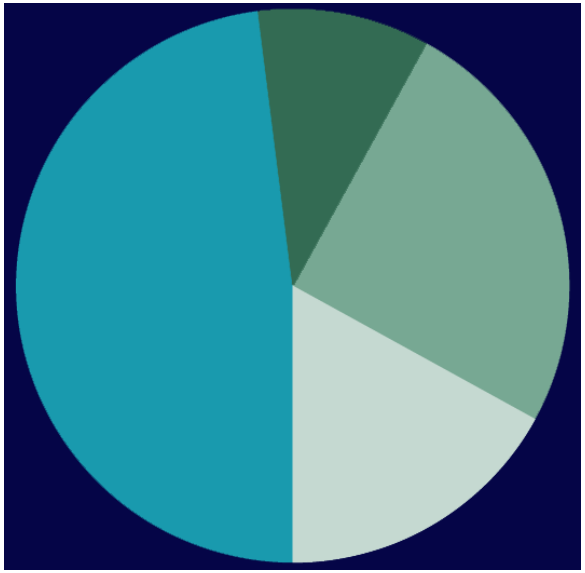
Erectile Dysfunction - Epidemiology

ED is highly prevalent

Men aged 40 to 70 years



Massachusetts Male Aging Study (n=1290)

ED (52%)

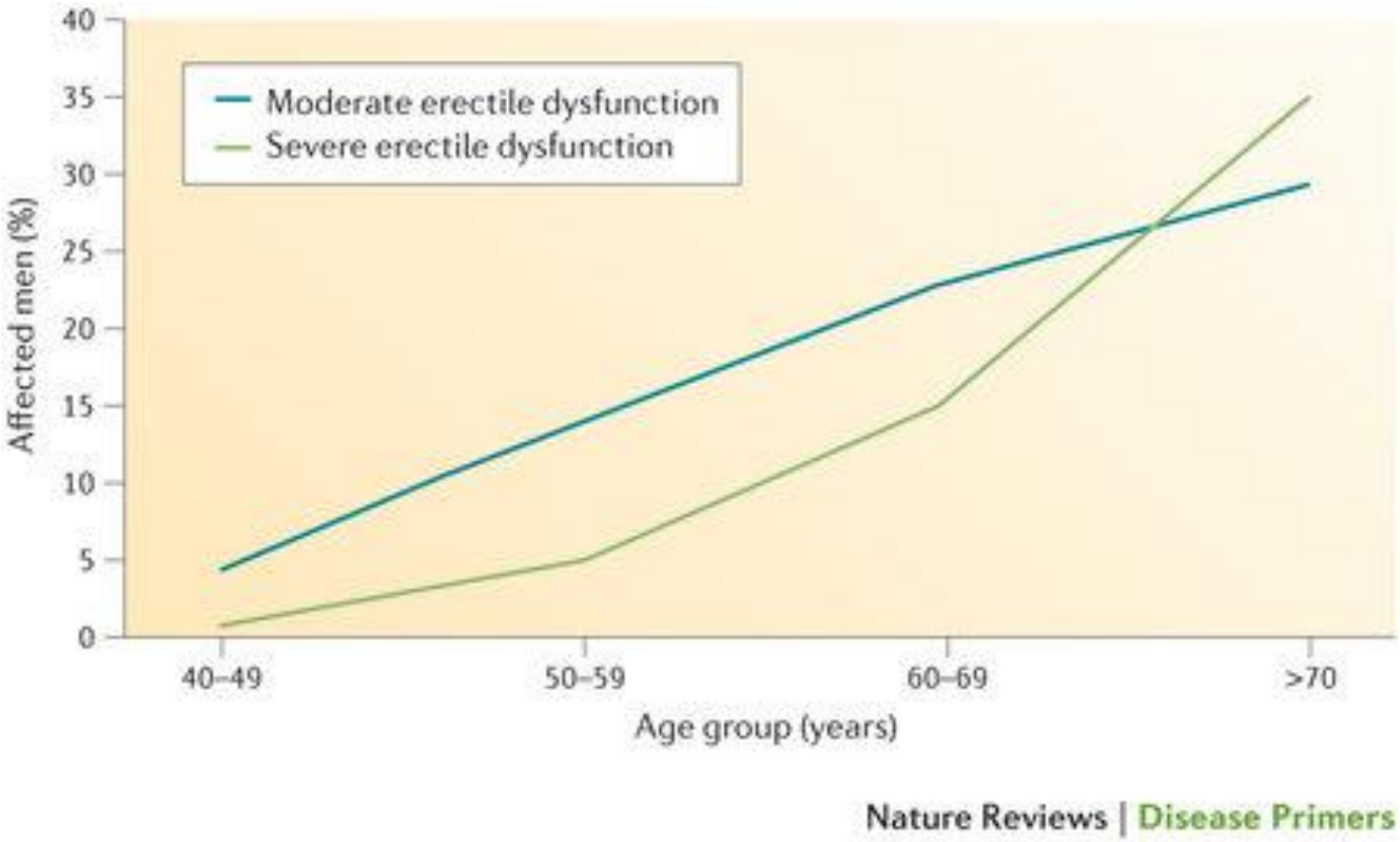
- **Complete (10%)**
- **Moderate (25%)**
- **Minimal (17%)**

- **No ED (48%)**

Feldman HA, et al. J Urol , 151:54-61, 1994

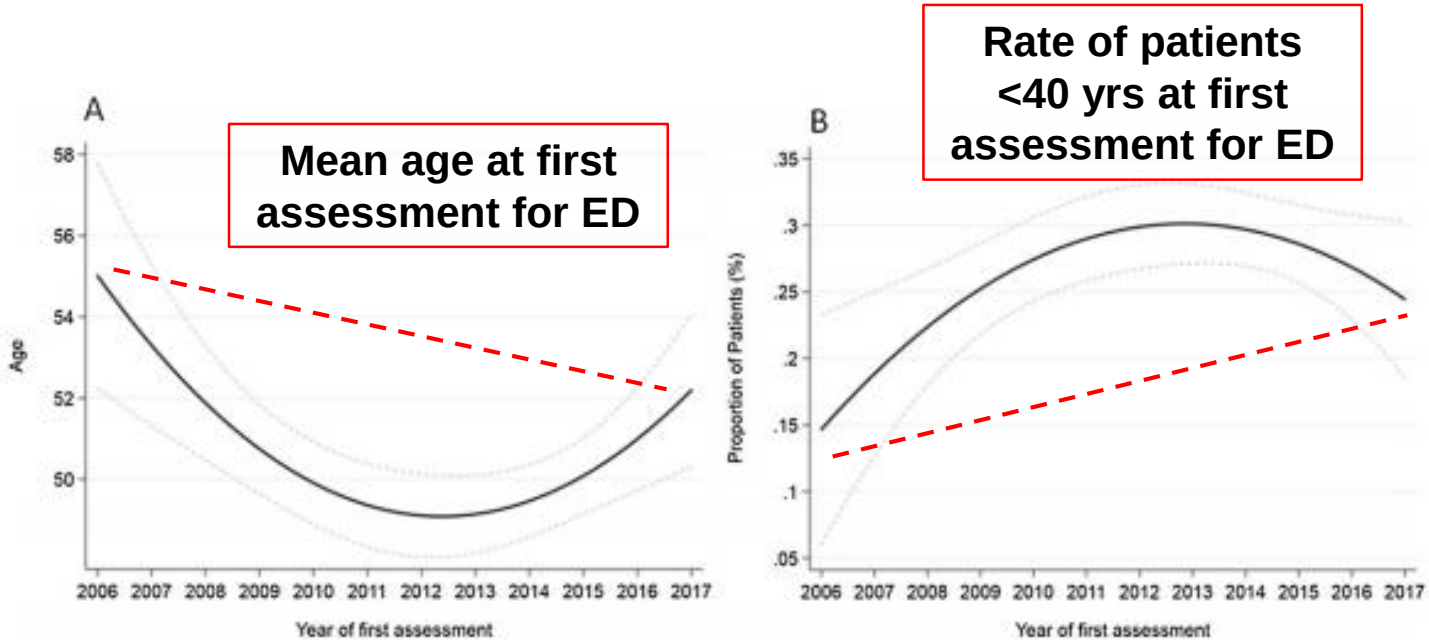
Erectile Dysfunction - Epidemiology

Prevalence of ED increases with age



Yafi FA, et al. Nat Rev Dis Primers. 2016 Feb 4;2:16003

Age at First Presentation for Erectile Dysfunction: Analysis of Changes over a 12-yr Period

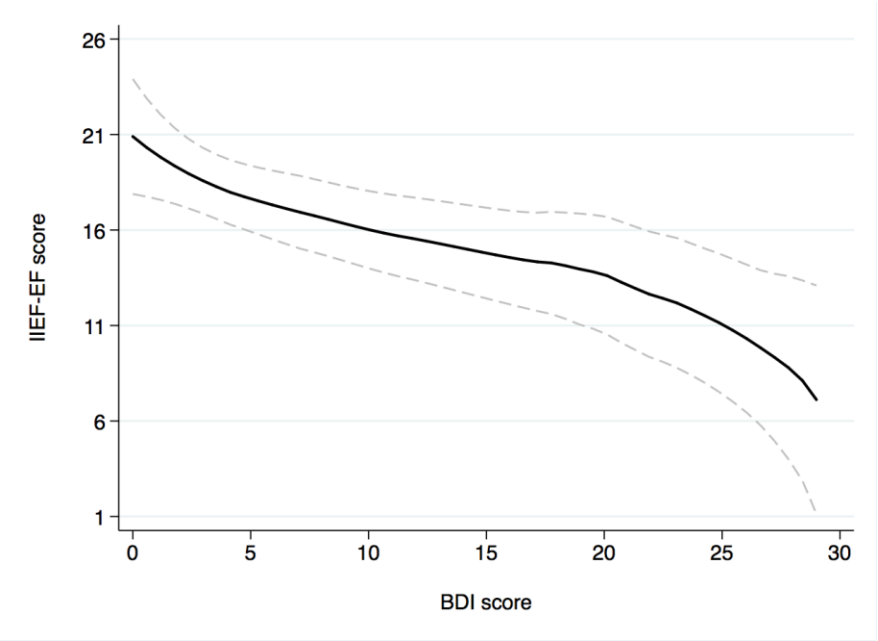


Age at first presentation for ED significantly decreased over the past decade. **Physicians should carefully assess EF even at younger age groups**

Capogrosso P, et al. Eur Urol Focus 2018, epub

Erectile Dysfunction & Mood deflection

Mood deflection (as assessed with the BDI) according to the EF status (as assessed with the IIEF-EF). The dashed lines represent the 95% CI



Patients with impaired EF showed scores suggestive for a **significant mood deflection**

The psychogenic component appears as a determining factor in youth ED

Pozzi, Capogrosso et al. AUA 2018, San Francisco

Erectile Dysfunction & Mood deflection after radical prostatectomy for prostate cancer

Logistic regression models predicting pathologic BDI score and IIEF-SD domain (OR; *p* value [95%CI]) in the whole cohort

	Pathologic BDI		Pathologic SD domain	
	UVA model	MVA model	UVA model	MVA model
Age	1.87; 0.007 [1.26 – 4.21]	1.78; 0.008 [0.87 – 0.98]	1.08; <0.001 [1.05 – 1.12]	1.07; 0.001 [1.03 – 1.11]
Marital Status (yes)	0.61; 1.71 [0.31 – 1.23]	2.41; 0.176 [0.64 – 8.66]	0.14; 0.32 [0.74 – 1.21]	0.29; 0.63 [0.27 – 1.47]
RARP vs. ORP	4.38; <0.001 [2.42 – 7.93]	5.01; <0.001 [2.35 – 10.64]	3.53; <0.001 [2.20 – 5.67]	3.70; <0.001 [2.09 – 6.57]
Postoperative ED (IIEF-EF<22)	2.77; 0.02 [1.18 – 6.54]	7.31; 0.013 [1.53 – 4.98]	8.17; <0.001 [2.77 – 9.01]	6.34; <0.001 [3.24 – 10.49]
Postoperative Urinary continence	0.75; 0.38 [0.40 – 1.41]	0.71; 0.417 [0.32 – 1.59]	0.71; 0.22 [0.42 – 1.22]	0.74; 0.90 [0.48 – 1.68]
Pathological Stage pT2 vs. pT3/pT4	1.63; 0.89 [0.95 – 2.82]	0.79; 0.556 [0.36 – 1.72]	1.34; 1.77 [0.87 – 2.06]	0.85; 0.95 [0.56 – 1.60]

RP experience @OSR, Milan, Italy

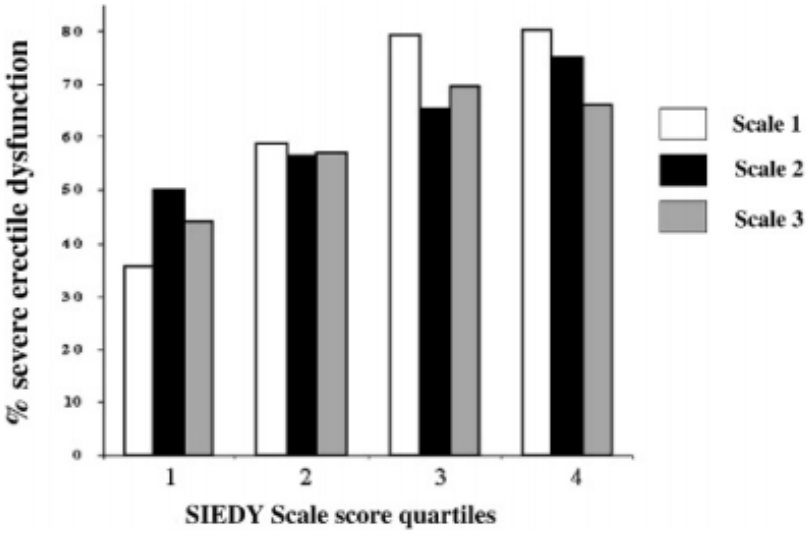
Depressive symptoms after surgical treatment for PCa are significantly associated with post-operative ED

Boeri L, et al. J Urol. 2017 Sep 1. pii: S0022-5347(17)77423-X

Erectile Dysfunction & Couple relationship

Assessment of the Relational Factor in Male Patients Consulting for Sexual Dysfunction: The Concept of Couple Sexual Dysfunction

The relational component of male sexual dysfunction **was explored using the Structured Interview on Erectile Dysfunction** (SIEDY)



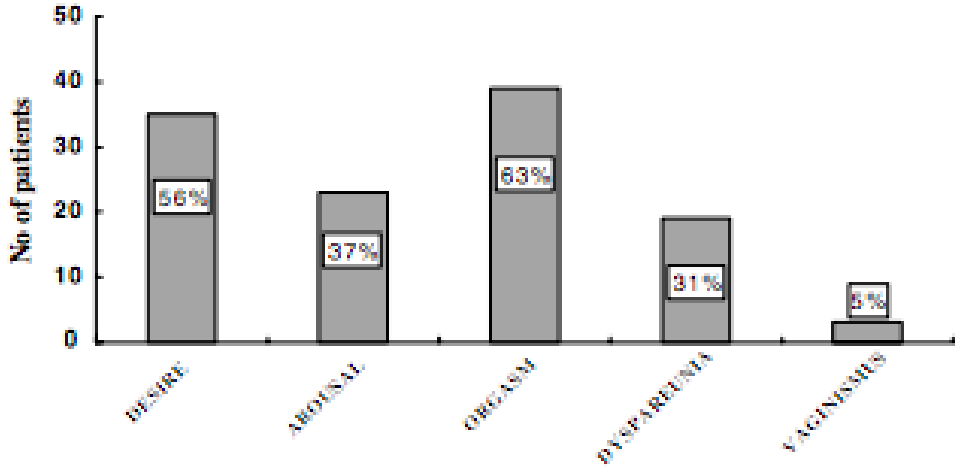
The presence of severe ED was significantly associated with worse couple quality of life according to the SIEDY score

Corona et al. J Androl. 2006 Nov-Dec;27(6):795-801

ED has a detrimental impact on **patients quality of life** and **couple relationship**

What about the partner?

Erectile Dysfunction – Partner perspective

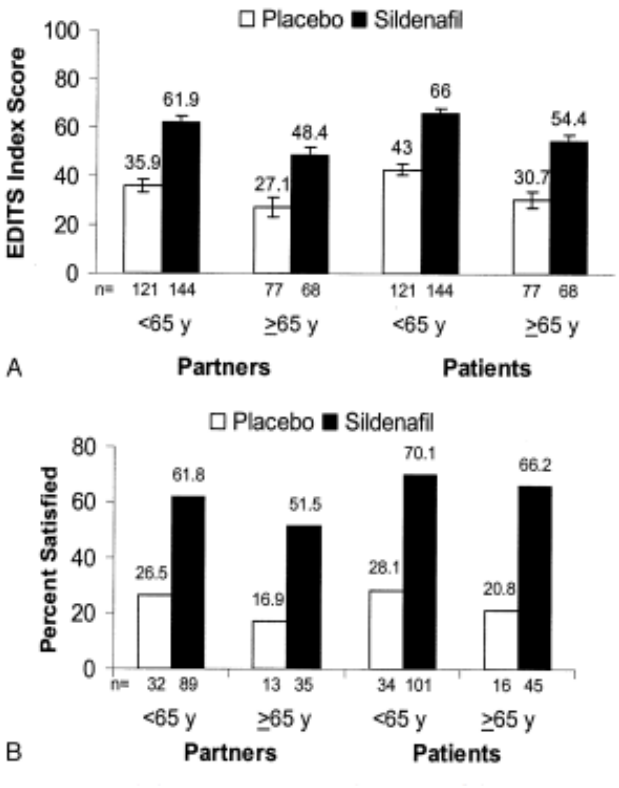


Many female partners of men with ED **report having some form of sexual disorder, mostly orgasmic problems and decreased sexual desire**.

Greenstein et al. Int. J. Impot. Res. 18, 44–46 (2006).

PARTNER RESPONSES TO SILDENAFIL CITRATE (VIAGRA) TREATMENT OF ERECTILE DYSFUNCTION

FRANCESCO MONTORSI AND STANLEY E. ALTHOF



After 6 to 12 weeks of treatment, **the partners of patients taking sildenafil were significantly more satisfied with the treatment** than were partners of patients taking placebo, irrespective of their age

Montorsi & Althof Urology. 2004 Apr;63(4):762-7

Do we have to involve the partner when managing patients with ED?

ED treatment– The importance of the partner

Partner's encouragement can be a crucial factor in persuading men to seek treatment for their ED

TABLE II. *Age distribution of men seeking or not seeking treatment (n = 637)**

	Age (yr)					
	50–54	55–59	60–64	65–69	70–76	Total
Had not sought treatment†	47	63	92	105	125	432
	(10.9)	(14.6)	(21.3)	(24.3)	(24.3)	(100)
Had sought treatment†	19	36	36	62	52	205
	(9.3)	(17.6)	(17.6)	(30.2)	(25.4)	(100)
Total	66	99	128	167	177	637

* *Numbers in parentheses are percentages. Excludes 12 men who did not indicate whether they had sought treatment or not.*
† *Differences among age groups not statistically significant (P = 0.42).*

The primary reasons for seeking treatment were to improve self-esteem (44.8%), awareness of the availability of a new treatment (33.4%), or **partner insistence (11.3%)**

Ansong et al. Urology 1998;52:834–7.

ED treatment– The importance of the partner

Table 3 Participants' reasons for discontinuing PDE5 use

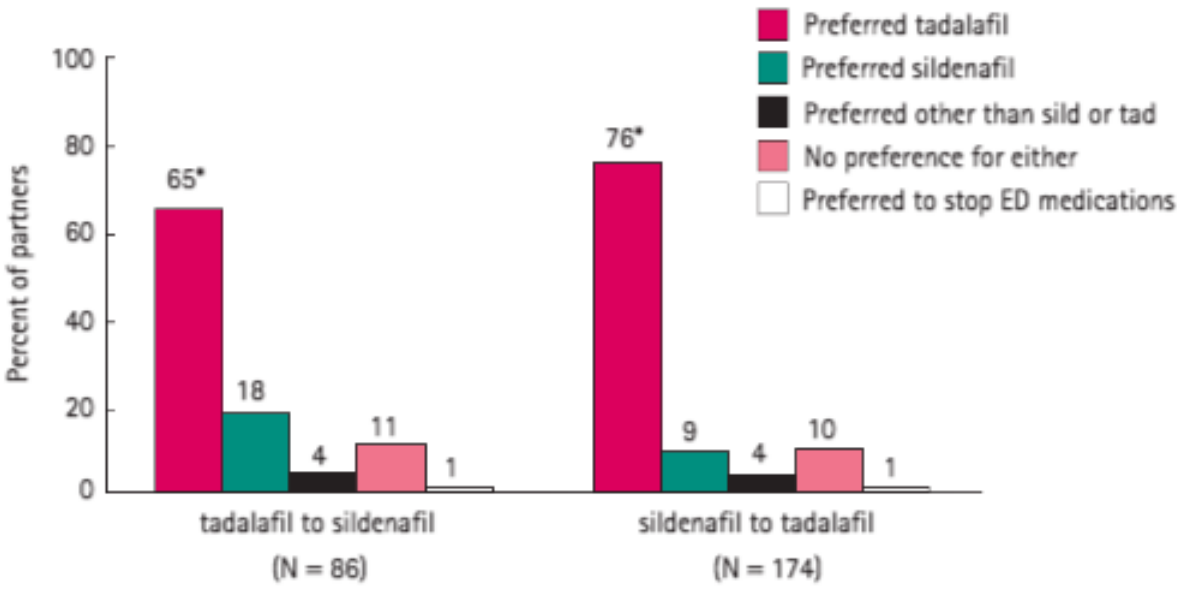
Main reason given for nonuse of ED medication	Men, N (%)	Women, N (%)
Illness	8 (34.8)	5 (17.9)
Cost	7 (30.4)	11 (39.3)
Not needed	3 (13)	3 (10.7)
Partner problems	2 (8.7)	7 (25)
No partner	2 (8.7)	2 (7.1)
Lack of efficacy	1 (4.3)	—
Side effects	—	—
Total number of men reported to be no longer using ED medication	23 (100)	28 (100)

Partners may have a role in influencing PDE5is treatment discontinuation

Conaglen et al. J. Sex. Med. 9, 857–865 (2012).

ED treatment– The importance of the partner

Partner preferences for different treatment options should always be carefully considered and any ED treatment should be chosen and accepted by both the patient and his partner, **or it will not be used**



Lee et al. BJU Int. 98, 623–629 (2006).

TREATING THE COUPLE

Two options should be considered:

- Attempting to bring the partner into the office
- More realistically: seeking information about and providing information to, the partner, via the patient

Table 1 Questions to help assess the patient's level of communication with his partner about his ED, and levels of partner support

- Have you spoken with your partner about your erection problem?
- Is your partner supportive of you getting treatment to improve your erection?
- Does your partner have any concerns about the treatment?
- Does your partner want to come and talk to me or to another doctor about improving your sex life together?
- Do you know if your partner has any concerns about her own sexual function, or about any other health issues?
- Is there anything else I should know to help me understand this problem?

Dean et al. Int J Clin Pract. 2008 Jan;62(1):127-33

Take Home Message

- **ED may significantly affect patient's quality of life and couple relationship**

- **Partners of patients with ED may suffer from sexual dysfunctions and lower overall sexual satisfaction**

- **Partners should be involved in the clinical management of patients with ED to increase the chance of successful treatment**