

How to improve the quality of life at male population over 50 years old with erectile dysfunction

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Objective

To identify the modality to improve the quality of life in a male population over 50 years by early detection of erectile dysfunction during a screening which take place simultaneous with the a prostatic cancer screening and by initiation of a 5 PDE inh patient adapted treatment

Methods

We have organized a study, CLuj-Napoca PrOStatic CancER Screening (CLOSER) Program, between March 2005 until middle of August 2006 in order to detect the patients with prostatic cancer in early stage. Next to standard tests for prostatic cancer screening, patients completed optionally the International Index of Erectile Function (IIEF). For those who completed IIEF tests, a 5 weeks treatment was initiated in randomized, patient depended order, with tadalafil, vardenafil, sildenafil—one weeks for each drug and 2 washout weeks. After this period patients continued with the 5 phosphodiesterase inhibitor (5 PDE inh) which they considered that improve overall satisfaction—Sexual Encounter Profile, diary question SEP5

Results

From a totally of 5031 men over 50 years-mean age 62,4—who enter in this prostatic cancer screening, 3672 were willing to speak about their sexual problems, but only 3219 of them have completed the IIEF test. Severe erectile dysfunction was presented at 526 patients, moderate erectile dysfunction was presented at 832 patients, mild erectile dysfunction was presented at 1413 patients and 448 patients had no erectile dysfunction. A totally of 2614 patients entered in the initial 5 weeks treatment period. Mean change from baseline of SEP5 after this period was 48,9 ($p < 0,05$). A totally of 1875 continued the treatment after the initial period, 61% of them preferred a long acting 5-PDE inh

Conclusion

Prostatic cancer screening is a helpful tool for an early detection of the erectile dysfunction and the initiation of a simple, patient adapted, 5 PDE inh treatment improve quality of life