PD18-08
PRESERVATION OF SEXUAL FUNCTION 5-YEARS AFTER WATER VAPOR THERMAL THERAPY FOR BENIGN PROSTATIC HYPERPLASIA
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INTRODUCTION AND OBJECTIVE: Erectile dysfunction (ED) and ejaculatory dysfunction (EjD) are well documented outcomes of traditional prostate surgery and pharmacotherapy for treatment of benign prostatic hyperplasia (BPH). The objective of this analysis was to evaluate long-term change in ED/EjD after a single thermal therapy procedure in the Rezum II pivotal study.

METHODS: A total of 197 subjects, mean baseline age 63 years (±7.0), International Prostate Symptom Score (IPSS)>13 maximum flow rate (Qmax)<15 mL/s, and prostate volume 30-80 cc were randomized (2:1) to water vapor thermal therapy or sham procedure (control) and followed for 5 years. After 3 months, 53 controls were reclassified to cross over to treatment and were followed for 5 years. ED was assessed using the International Index of Erectile Function (IIEF-EF) and EjD was assessed using the Male Sexual Health Questionnaire (MSHQ). The current post hoc analysis was performed on groups of sexually active subjects who had either baseline ED/EjD or normal baseline function, and who had no other medical therapy for BPH during the 5-year study period.

RESULTS: All subgroups experienced significant, durable improvement in IPSS (p<0.0001). Patients without ED/EjD at baseline had slightly lower absolute change in IIEF-EF (-2.4±8.9) over 5 years of follow-up compared to those with baseline ED (-3.0±10.1) or EjD (-4.1±9.2). MSHQ-EjD function had a similar pattern while bother and impact on relationships had little change during the 5-year follow-up in all subgroups. See Table 1 and Figure 1.

CONCLUSIONS: Treatment for BPH with water vapor thermal therapy durably improved IPSS without clinically significant impact on ED/EjD. Accounting for functional declines that occur with aging, these results suggest that normal pretreatment scores may align with preservation of erectile and ejaculatory function after treatment while patients with baseline ED/EjD can expect continued, age-related decline unimpacted by water vapor thermal therapy.

Source of Funding: No external funding was necessary to conduct this study.