203

Authors:

U Löffler, J Kutzenberger, DH Sauerwein, J Schubert, DH Zermann

Institution: Department of Urology, Friedrich-Schiller-University Jena, Werner-Wicker-Klinik Bad

Wildungen

Title: PENILE PROSTHESIS FOR URINARY MANAGEMENT AND ERECTILE DYSFUNTION IN

SPINAL CORD INJURY PATIENTS - LONG TERM RESULTS

Aims of Study:

Penile prosthesis are the last option for the treatment of erectile dysfunction. In spinal cord injury patients penile implants are also successfully used for urinary management. We evaluated the long term results in spinal cord injury patients.

Methods:

Between 1980 and 1996 245 spinal cord injury patients (mean age 40.8 (16-75) years; 188 paraplegics, 57 tetraplegics) were treated for erectile dysfunction and/ or urinary incontinence by implantation of penile prostheses. Duration of paralysis was 11.2 (1-52) years. After completing neuro-urological diagnostics and evaluation all patients included in this study were considered candidates for the implantation of penile prosthesis.

Results:

During 17 years 293 surgical procedures in 245 patients were done. 147 semirigide (Jonas); 113 semiflexible (Dynaflex) and 33 flexible prostheses (AMS 800) were implanted. There were three treatment groups: 1) urinary management n=134; 2) erectile dysfunction n=60; and 3) both n=51.

After a mean follow-up of 11.2 (4 to 21) years 195 patients were reevaluated in clinic based on the two different main indications: 1) n=135 for urinary management and 2) n=92 for erectile dysfunction.

In 122 patients (90.3%) the urinary management problems were resolved. The treatment of erectile dysfunction was successful in 76 patients (82.6%). The complication rate was low, there were 43 revisions for technical reasons and infections. Infection rate was 5% (n=12). The perforation rates were different for different implant devices: semirigide 18.1% (n=15/83); semiflexible 2.4% (n=2/84); and flexible 0 (n=0/28).

Conclusions:

The implantation of penile prosthesis is a safe procedure for the management of erectile and urinary problems. Based on technical advances (semirigide – flexible) the complication rate is dropping down over the years. We conclude that the implantation of a penile prosthesis after a careful neuro-urological work-up is indicated in erectile dysfunction as well as for the management of urinary problems in spinal cord injury patients.

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