835

De Nunzio C¹, Cancrini F¹, Lombardo R¹, Presicce F¹, Nacchia A¹, Deroma M¹, Tubaro A¹

1. Sapienza Università di Roma, Azienda Ospedaliera Sant'Andrea

METABOLIC SYNDROME DOES NOT INCREASE THE RISK OF EJACULATORY DYSFUNCTION IN PATIENTS WITH LOWER URINARY TRACT SYMPTOMS AND BENIGN PROSTATIC ENLARGEMENT: A SINGLE CENTER ITALIAN COHORT STUDY

Hypothesis / aims of study

Aim of our study was to evaluate the relationship between Metabolic Syndrome and ejaculatory dysfunction in patients with Lower Urinary Tract Symptoms (LUTS) and Benign Prostatic Enlargement (BPE)

Study design, materials and methods

From 2012 onwards, a consecutive series of men with lower urinary tract symptoms (LUTS), not on medical therapy, evaluated with the International Prostatic Symptoms Score (IPSS) were enrolled into a prospective database. All patients were assessed for erectile and ejaculatory dysfunction using the short form of the International Index of Erectile Function (IIEF) and the male sexual health questionnaire ejaculatory dysfunction short form (MSHQ-ejd-SF). Metabolic syndrome (MetS) was defined according to the Adult Treatment panel III criteria (ATP III).

Results

220 patients were enrolled. 48/220 (22%) presented the MetS. Overall 109/220 (50%) patients were affected by a moderate/severe ejaculatory dysfunction. Patients with ejaculatory dysfunctions were older (69 \pm 7 vs 63 \pm 8 p=0.000), with higher levels of glucose (96 \pm 19 vs 93 \pm 23 p=0.035), more symptomatic (IPSS: 9.7 \pm 6.9 vs 6.9 \pm 5.2, p=0.001), presented a worst erectile function (IIEF: 14 \pm 9 vs 21 \pm 5; p=0.000) and were more frequently affected by hypertension (61/109: 56% vs 40/111: 36%; p=0.004) . However patients with ejaculatory dysfunction were not affected more frequently by MetS when compared to patients without ejaculatory dysfunction (25/109: 23% vs 23/111: 21%; p= 0.745). On multivariate analysis, Age (OR:1.058, 95%CI 1.016-1.123; p=0.007), IIEF score (OR:0.899, 95%CI0.856-0.943 p=0.000) and IPSS (1.065, 95%CI 1.011-1.123; p=0.018) were found to be predictors of ejaculatory dysfunction.

Interpretation of results

In our series MetS was not found to be predictive of ejaculatory dysfunction.

Concluding message

In our single center study, MetS has no influence on the ejaculatory dysfunction evaluated with the MSHQ-ejd-SF. Ejaculatory dysfunction is mainly related to LUTS severity and concomitant erectile dysfunction.

References

- 1. Metabolic syndrome and lower urinary tract symptoms: the role of inflammation. Gacci M, Vignozzi L, Sebastianelli A, Salvi M, Giannessi C, De Nunzio C, Tubaro A, Corona G, Rastrelli G, Santi R, Nesi G, Serni S, Carini M, Maggi M.
- 2. Male Lower Urinary Tract Symptoms and Cardiovascular Events: A Systematic Review and Meta-analysis. Gacci M, Corona G, Sebastianelli A, Serni S, De Nunzio C, Maggi M, Vignozzi L, Novara G, McVary KT, Kaplan SA, Gravas S, Chapple C

Disclosures

Funding: NONE Clinical Trial: No Subjects: NONE