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SEXUAL MORBIDITY IN PATIENTS SUBMITTED TO PROSTATIC BRACHYTHERAPY FOR LOCALIZED PROSTATE CANCER

Hypothesis / aims of study

Brachytherapy is a valid treatment option for localized prostate cancer, frequently associated with low morbidity and good health related quality of life (HR-QoL) levels. There are few randomized studies relating late sexual morbidity and HR-QoL in patients submitted to prostatic brachytherapy. The aims of this study are: assess and characterize late sexual morbidity and HR-QoL in patients submitted to prostatic brachytherapy with ¹²⁵I; assess the impact of pre-treatment factors in the development of sexual morbidity; determine the impact of sexual satisfaction in HR-QoL and patients global satisfaction.

Study design, materials and methods

All patients submitted to prostatic brachytherapy in a single urology department between October 2003 and October 2016, were asked to answer the EPIC, IIEF and BSFI questionnaires. The results were treated in function of patient age and time since brachytherapy. Associations were tested according pre-treatment sexual function and patients morbidities (diabetes mellitus, smoking habits and hypertension).

Results

From 536 patients, 27 died and 203 (37,9%) validly answered to the questionnaires. The median follow-up was 6.42 years (SD=2,6 years). There was a significant decline in all sexual domains with the exception of sexual desire. Erectile dysfunction was the main developed symptom, followed by ejaculatory dysfunction and orgasmic deterioration. 67.4% of patients suffer from some degree of sexual bother, but only 14.5% patients said it was a severe problem. 52.8% of patients were satisfied with their sexual performance. The development of sexual dysfunction has an important impact on global satisfaction. Pre-treatment erectile function, diabetes mellitus and patient age has a significant influence in the development of sexual dysfunction and impact in global sexual morbidity development.

Interpretation of results

Erectile dysfunction following prostate brachytherapy has an important impact in patients` satisfaction and HR-QoL, but the majority of patients are able to have adequate erections for sexual activity. A significant correlation was found between pre-implant potency, patient age and diabetes mellitus, and the development of sexual morbidity.

Concluding message

In what concerns sexual morbidity, patients' satisfaction and HR-QoL after brachytherapy are high and it is a well-accepted treatment.

Disclosures

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