388

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ERECTILE DYSFUNCTION PREVALENCE IN A MALE MULTIPLE SCLEROSIS PATIENTS COHORT: PILOT, OBSERVATIONAL STUDY.

Hypothesis / aims of study

Most of multiple sclerosis (SM) patients (pts) come to urologic observation due to voiding disorders. Some of these subjects present also erectile dysfunction (ED), which is often underestimated for several reasons either by pts and by the physician. In this observational, pilot study, the prevalence of ED observed in SM population referring to our ambulatory is reported.

Study design, materials and methods

111 SM male pts (aged 21-46) have been investigated from February 2004 to January 2005 by means of physical examination and IIEF-V questionnaire. All the pts came to our observation due to voiding disorders. Results

Micturition symptoms have been reported by all the pts interviewed. 39 pts reported sexual symptoms (age from 22 to 37) at the anamnesis, characterized by: lowering of penile rigidity with marginal penetration possible (26/39 = 66%), early lost of erection with no penetration possible (7/39 = 17.9%) or the association of these two disorders (6/39 = 15,4%). 19/26 (73%) men reported also a decrease of sexual desire. IIEF scores resulted from 6 to 16, suggestive of ED of medium-severe entity. None presented hormonal alterations at blood examinations. 21 pts signed consent to be submitted to dynamic penile ultrasound color-doppler (USCD) while the others did not give the consent; in all the pts studied by USCD the test resulted negative. Only 13/39 pz (33%) spontaneously reported ED, the others told their sexual symptoms only at the IIEF questionnaire.

Interpretation of results

Prevalence of SM pts comes to urological observation for voiding disorders. However, neither the physician nor the pts should avoid to not-consider the presence also of sexual symptoms, whose manifestation needs specific diagnostic tools to exclude or individuate if the pathogenesis is secondary to the neurologic disease, or the consequence of a psychological altered status, but almost to early treat the condition and improve QoL. <u>Concluding message</u>

This study shows that ED prevalence in MS pts is significant. The pts could sometimes avoid to report sexual symptoms causing a diagnosis and treatment delay. The role of the specialist is always to investigate the presence of these symptoms, especially with standardized tools such as ED questionnaires.

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HUMAN SUBJECTS: This study did not need ethical approval because NOT NECESSARY, EPIDEMIOLOGIC INVESTIGATION and did not follow the Declaration of Helsinki - with approval by the ethics committee - in the sense that NOT NECESSARY Informed consent was obtained from the patients.