



## INAHTA Briefs

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<b>Issue:</b>	What treatment options for erectile dysfunction should be available to veterans?
<b>Title:</b>	Treatment Options for Male Erectile Dysfunction: A Systematic Review of Published Studies of Effectiveness
<b>Agency:</b>	VA Technology Assessment Program, Office of Patient Care Services, Room D4-142, 150 S. Huntington Ave (11-T), Boston, MA 02130 Tel: 857-364-4469, Fax: 857-364-6587
<b>Reference:</b>	VA Technology Assessment Program Report No. 11, January, 1999. <a href="http://www.va.gov/vatap">www.va.gov/vatap</a>
<b>Aim:</b>	To evaluate the efficacy and safety of treatment options for male erectile dysfunction, focusing on new FDA-approved therapies with the greatest resource and clinical implications to VA.
<b>Conclusions and results:</b>	A comprehensive search of the peer-reviewed published literature yielded studies on oral/transdermal therapies such as sildenafil (Viagra), yohimbine (Yocon, Yohimex, Aphrodyne, Erex), phentolamine (Vasomax), trazodone (Desyrel), aminophylline+isosorbide dinitrate+co-dergocrine, buflomedil transdermal electromotive administration, intraurethral alprostadil (MUSE), intracavernous injections such as alprostadil (Caverject), phentolamine+papaverine, alprostadil+phentolamine+papaverine (Trimix), and apomorphine, a treatment under development. The results indicate that 1) educating the patient and partner about the advantages and disadvantages of commonly used treatments is important, 2) most patients desire a convenient noninvasive therapy such as oral medication, 3) psychosexual counseling may be helpful in patients with psychogenic erectile dysfunction; and 4) vacuum constriction devices, intraurethral and intracavernosal vasoactive drug injection therapy, surgical implantation of a penile prosthesis and oral medications are effective treatments for primary organic erectile dysfunction.
<b>Recommendations:</b>	VA acknowledges that vacuum constriction devices, intraurethral and intracavernosal vasoactive drug injection therapy, surgical implantation of a penile prosthesis and oral medications are effective treatments for primary organic erectile dysfunction. Oral medications are not recommended for use without restrictions in the VA population at the present time.
<b>Methods:</b>	Comprehensive literature searches of randomized clinical trials published in English from 1995 thru 1999 were conducted using Medline, HealthStar, Embase, Current Contents and Cochrane computer databases. Search strategies used the terms impotence and erectile dysfunction with the subheadings therapy, drug therapy, surgery and disease management. The result was combined with clinical trials, controlled trials, randomized controlled trials, meta-analyses, guidelines, academic or systematic reviews and multi-center studies. Information was also included from patient preference studies, post-marketing reports, product inserts and FDA Medwatch announcements.
<b>Further research/reviews required:</b>	Suggested areas for research are discussed in detail in the report
<b>Written by:</b>	The VA Coordinating Center of the Cochrane Review Group in Prostate Diseases and Urologic Malignancies, the Minneapolis/VISN 13 Center for Chronic Diseases Outcomes Research and the Section of Urology, Minneapolis VAMC; Timothy J Wilt, MD, MPH; Howard A. Fink, MD; Roderick MacDonald, MS; Indulis R. Rutks, BS; Douglas Schow, MD