

## South Central Priorities Committee

(Southampton, Hampshire, Isle of Wight and Portsmouth PCTs)

### Policy Recommendation 96a: Evaluation of treatments for erectile dysfunction

Date of Issue: February 2011 amended July 2011

The Southampton, Hampshire, Isle of Wight and Portsmouth Priorities Committee has considered the evidence of clinical and cost-effectiveness for treatment for erectile dysfunction in adult patients and made the following recommendations:

1. Treatment with phosphodiesterase type-5 inhibitors in the minimum effective dose is **RECOMMENDED** for the groups of patients identified in HSC 1999 / 148 and HSC 1999/177 with a maximum frequency of dosing of two times per month using the drug with the lowest acquisition cost.
2. Treatment with psychosexual interventions is **LOW PRIORITY** in view of limited evidence for effectiveness and cost-effectiveness.
3. Treatment with vacuum erection devices is **LOW PRIORITY** in view of limited evidence for effectiveness and cost effectiveness.
4. Treatment with prostaglandin E1 intracavernosal injections and intra-urethral instillations is **RECOMMENDED** for groups of patients identified in HSC 1999 / 148 and HSC 1999/177 only if oral phosphodiesterase type-5 inhibitors are contraindicated or ineffective. The maximum frequency of dosing is two times per month using the drug with the lowest acquisition cost.
5. Treatment with penile implants is **LOW PRIORITY** in view of limited evidence for effectiveness and cost effectiveness and the high complication rate.

Phosphodiesterase type-5 inhibitors (sildenafil, vardenafil and tadalafil) are oral drugs that enable a penile erection with sexual stimulation. There is evidence for the effectiveness of these drugs in men with erectile dysfunction of varying causes. The effectiveness of individual drugs is comparable and sildenafil has been shown to be cost-effective.

Psychosexual interventions such as counselling and psychotherapy comprise a group of techniques with limited evidence for effectiveness and no evidence of cost-effectiveness.

Vacuum erection devices are mechanical devices for producing an erection that is sustained with the placement of a constricting band across the base of the penis. There is limited evidence for the effectiveness of these devices and no evidence of cost-effectiveness.

Prostaglandin E1 is used in the treatment of erectile dysfunction when delivered locally into penile tissues. There is evidence for the effectiveness of intra-cavernosal injections of prostaglandin E1 in those unresponsive to oral drugs.

Penile implants can be surgically inserted into the penis for treating erectile dysfunction. There is limited evidence of effectiveness with a high proportion of patients having major complications.

#### NOTES:

1. *Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.*
2. *This policy will be reviewed in the light of new evidence or guidance from NICE.*
3. *South Central policies can be viewed at <http://www.sph.nhs.uk/priorities/policy-statements>*