

Excluded: Procedure not routinely funded

**Bedfordshire, Hertfordshire, West Essex, Luton and Milton Keynes
Priorities Forum statement - adapted for Bedfordshire CCG**

Number	85
Subject	Penile Rehabilitation following prostate surgery
Date of decision	February 2018
Date of review	February 2021

GUIDANCE

[This guidance is based on Thames Valley Priorities Committee Commissioning policy]

The goal of penile rehabilitation is to moderate the destructive processes that occur after prostatectomy in order to preserve erectile function, either through spontaneous or assisted means. Interventions including PDE5 inhibitors, alprostadil products and vacuum erection devices are used for penile rehabilitation.

NICE CG175 Prostate cancer: diagnosis and management, does not make recommendations on treatments specific to penile rehabilitation. A recent report and two systematic reviews, have found that studies for penile rehabilitation have produced conflicting results and evidence is lacking both in quality and in quantity.

The Priorities Forum has considered the evidence for the interventions for penile rehabilitation following prostate surgery. Due to inadequate evidence of clinical effectiveness and lack of evidence of cost effectiveness NHS funding for the early regular use of phosphodiesterase-5 (PDE5) inhibitors, alprostadil and vacuum erection devices for penile rehabilitation in patients with prostate cancer after radical prostatectomy are considered interventions **not normally funded**.

This policy should be considered in conjunction with local policies on treatment of erectile dysfunction.

For information on penile prosthesis see NHS England Clinical Commissioning Policy: Penile prosthesis surgery for end stage erectile dysfunction

<https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2016/08/clinical-com-pol-16059p.pdf>

References

1. UK Medicines Information (2014). What is the rational and evidence for the use of regular, rather than on-demand dosing of phosphodiesterase-5 inhibitors after radical prostatectomy.
2. BJU International (2013). Penile rehabilitation after radical prostatectomy: What the evidence really says. (112); 998- 1008.
3. Should we recommend an erectile rehabilitation after radical prostatectomy? Systematic review of the literature by the Sexual Medicine Committee of the French Urology Association. Progrès en urologie : journal de l'Association française d'urologie et de la Société française d'urologie, Dec 2014, vol. 24, no. 16, p. 1043-1049, 1166-7087

Human Rights and Equalities Legislation has been considered in the formation of this policy