

Erectile Rehab – DR. SHAH



AM I GOING TO BE ABLE TO HAVE NORMAL ERECTIONS AGAIN?

Recovery of erectile function after robot assisted radical prostatectomy is quite variable. As discussed prior to the surgery, many factors play a role on whether or not you will regain this function including age, medical problems (diabetes, high blood pressure), smoking history, whether a unilateral or bilateral nerve sparing procedure was performed, level of preoperative erectile function, whether or not you needed any oral medications to get an erection before the surgery, etc. Dr Shah will give you a realistic idea of whether you will regain potency. However, even for those who do regain their potency, **it can take time – sometimes years after the surgery, before you regain this function.** Fortunately, we have many treatments available for this problem.

WHAT ARE THE OPTIONS FOR TREATMENT OF E.D.?

- 1) Oral therapy (Viagra, Levitra, Cialis)
- 2) Vacuum Erection Device - <http://www.timmmedical.com/> or
<http://www.augustams.com/>
- 3) MUSE – a penile suppository
- 4) Penile Injection Therapy – Caverject, Edex, Bimix, Trimix
- 5) Penile prosthesis – surgical procedure

http://www.visitams.com/mens_erectile_restoration.html

Unfortunately, many of these treatments are NOT covered by insurance and you may need to pay out of pocket. Medicare recently stopped covering MUSE and Caverject/Edex. Bimix and Trimix are generic versions of injection therapy and may be more economical for some patients.

WHAT IS THE VACUUM ERECTION DEVICE?

A simple, non-invasive mechanical device that creates a vacuum to bring blood into the penis. The blood is held in place via a specially designed rubber band.



WHAT IS PENILE INJECTION THERAPY?

One of several treatments for erectile dysfunction and a method of penile rehabilitation for patients that have undergone nerve sparing robotic prostatectomy.

WHAT ARE THE RISKS OF INJECTION THERAPY?

Although generally safe, there are serious risks of penile injection therapy. Fortunately, these can be reduced with proper education and practice.

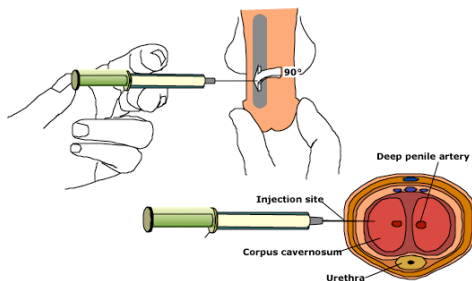
Priapism is the most serious risk which is a prolonged, painful erection lasting more than 2 hours. **THIS IS AN EMERGENCY** and you should come to the ER immediately if you experience this. Failure to promptly treat priapism can result in scarring, need for urgent surgery, and permanent erectile dysfunction.

Other risks include scarring at the injection site, pain at the injection site, bleeding or even a collection of blood (hematoma).

HOW DO I PERFORM INJECTION THERAPY?

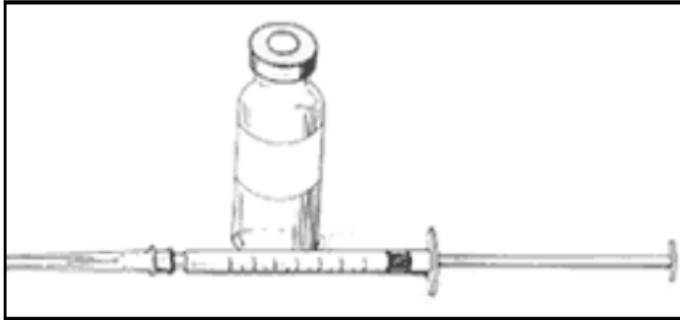
Dr. Shah will show you how to perform the therapy during clinic and give you a test dose.

First, you must locate the correct part of the penis to inject. You must avoid



the top (12 o'clock) and bottom (6 o'clock) locations. The correct injection site is on either side of the penis at 3 o'clock or 9 o'clock. This will deliver the medicine to a part of the penis called the corpora cavernosa.

To begin the injection, wash your hands with soap. Use an alcohol wipe to clean off the top surface of the bottle containing the medicine. Use a brand new tuberculin type syringe with a 29 Gauge, ½ inch needle. The syringe should have a maximum capacity of 1 ml but you will only be injecting a very small fraction of that.



The dosage right for you will be determined at your clinic appointment with Dr. Shah. However, typically you draw into the syringe only 0.1 ml of the medicine (that is, one-tenth of the capacity of the syringe). It is VERY CRITICAL that you do not draw up more than the determined amount, because even a small overdose can have serious side effects and cause permanent damage.



Grasp the head of the penis and put it on stretch. Push the needle the entire way into the side of the penis about midway along the shaft at the 3 or 9 o'clock locations. Inject the medicine and remove the needle. **Hold pressure using a**

guaze pad for 5 minutes!! Failure to do this can result in significant bleeding.

The erection should develop within 10 minutes and be sufficient for intercourse. It should ideally last less than 1 hour. **If it lasts more than 2 hours or you have accidentally injected more than the preset amount, go to an emergency room immediately.**

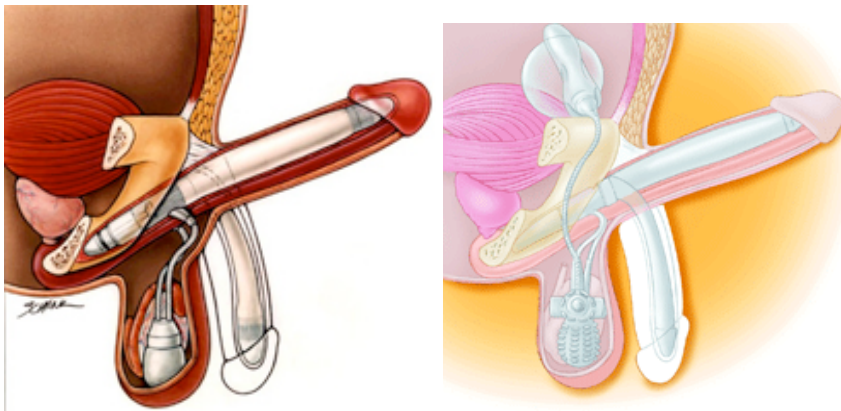
Do not inject yourself more than once every 3 days. Each time, inject in a slightly different location or a different side.

WHAT IS THE A PENILE PROSTHESIS?

A penile prosthesis is the permanent implantation of a mechanical device that will provide an erection for intercourse. Since it requires surgery and is a permanent implantation, it is usually reserved for cases in which a patient has been unsuccessful or unhappy with other less invasive treatments.

Satisfaction rates with a penile prosthesis are generally high, but like many surgical procedures, there are potentially serious risks. Mechanical break down of the device requiring replacement, infection, shortening of the penis, damage to local structures are some of the risks associated with the device.

There are 3-4 different types of prosthesis available. Some are simple cylinders that provide a partial erection at all times. Another variation has a pump in the scrotum. A third type has a pump in the scrotum as well as a reservoir located higher up. Dr. Shah can show you some models of the devices and go over risks and benefits of these devices.



For more information on penile prosthesis, visit http://www.visitams.com/mens_erectile_restoration.html

For more information, please contact Dr. Shah/Trish Seeber at (505) 925-0246 or visit www.roboticsugeryNM.com