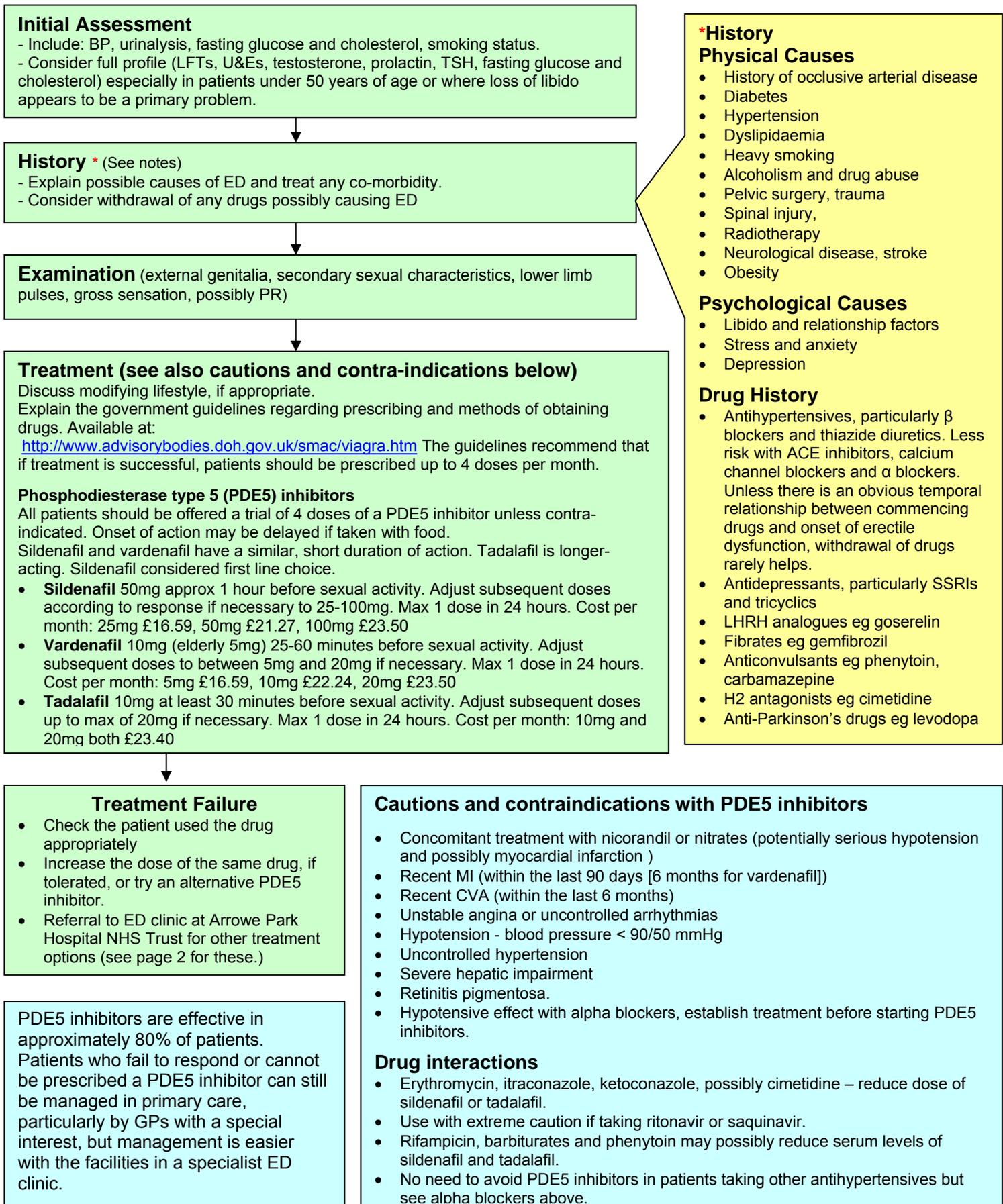


PRIMARY CARE

GUIDELINES FOR THE INITIAL MANAGEMENT IN PRIMARY CARE OF PATIENTS WITH ERECTILE DYSFUNCTION (ED)



Erectile dysfunction clinic

- Reassess patient and reconsider psychosexual referral and hormonal profile.
- If patient requires antidepressants consider use of trazodone.
- If testosterone supplementation being considered check PSA to rule out occult prostate malignancy.

Other Treatment Options (from secondary care pathway)

- Patients with a principally psychosexual disorder can be referred for psychosexual counselling to Dr Helen Wilkins at Women's Services, St Catherine's hospital (Tel: 604 7290) or to Relate (Tel: 0870 240 4246) if there are relationship issues.
- Patients with ejaculatory disorders, hormonal problems, pain or other pathology precluding intercourse should be referred to the appropriate specialist.
- If erectile problems are principally curvature due to Peyronies disease and this curvature is not precluding intercourse, the patient can be reassured. If curvature is not progressing there is probably no need to review the patient.
- If the patient has progressive curvature or pain as a result of Peyronies disease and this is precluding to intercourse, the patient should be referred to the ED clinic if they wish to undergo treatment.
- **Alprostadil** (intracavernosal or transurethral). Refer to dose instructions in the BNF. The first dose must be given by medically trained personnel. **MUSE urethral stick** Max 2 doses in 24 hours and 7 doses in 7 days. Cost per device: 125micrograms £10.38, 250micrograms and 500micrograms £11.30 1000micrograms £11.56. **Caverject Dual Chamber** Max 1 dose in 24 hours and 3 doses per week. Cost for 2 cartridges: 10 micrograms £14.70, 20 micrograms £19.00. **Caverject vials** Cost 5 micrograms £7.73, 10 micrograms £9.24, 20 micrograms £11.94, 40 micrograms £21.58
- **Active II vacuum pump.** Cost £149.00. GPs may be asked to prescribe this on the NHS following referral from the ED clinic.

Prescribing for ED

Drug therapies and vacuum devices are currently only available on the NHS for certain patients under the prescribing system "Schedule 11". The prescription should be marked "SLS" (selected list scheme).

These patients fall into two main groups:

1. Men who are suffering from any of the following:
 - Diabetes
 - Multiple sclerosis
 - Parkinson's disease
 - Poliomyelitis
 - Prostate cancer
 - Severe pelvic injury
 - Single gene neurological disease
 - Spina bifida
 - Spinal cord injury
 - On dialysis for renal failure or who have renal failure treated by transplant
 - Men who have undergone a prostatectomy or radical pelvic surgery
2. Men who were already being treated for ED on the NHS on 14th September 1998

Additionally for other men who are suffering from extreme distress as a result of ED, government guidelines state that they can receive treatment on the NHS in exceptional circumstances. **Assessing the degree of distress can be left to the GPs discretion without the need for specialist assessment.**

Patients being prescribed drugs under Schedule 11 would pay the normal prescription charge unless they are exempt from doing so. Patients who do not fit into any of the above categories can be prescribed treatment for their ED on private prescription.

The DOH has recommended that 4 doses per month of PDE5 inhibitors are prescribed for financial reasons. There is no clinical reason why patients may not obtain larger quantities than this on private prescription.

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