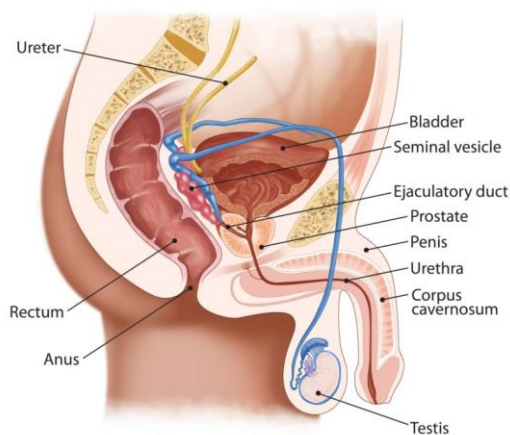


Shock Wave Therapy Found Safe, Effective for Erectile Dysfunction

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The likelihood of successful low-intensity extracorporeal shock wave therapy for vasculogenic erectile dysfunction (ED) is greater in younger patients and those with a shorter duration of ED and no associated comorbidities such as hypertension or diabetes, a study found.

Low-intensity extracorporeal shock wave therapy (Li-ESWT) is safe and effective for improving mild-to-moderate vasculogenic erectile dysfunction (ED), new data suggest.

Therapeutic success is especially pronounced among young patients with a short duration of ED and no associated comorbidities, Hussein M. Adeldaeim, MD, of Alexandria University in Alexandria, Egypt, and colleagues reported in *Urology*.

Dr Adeldaeim's team studied 425 patients with vasculogenic ED, all of whom underwent Li-ESWT with the PiezoWave2 (Richard Wolf) device. They assessed ED using the Sexual Health Inventory for Men (SHIM) score. The SHIM includes 5 questions each having 5 possible responses scored from 1 to 5. Answer scores from the 5 questions are added to arrive at a total score, with 25 the highest attainable score. Higher scores indicate better erectile function. The investigators defined successful treatment as a 6-month SHIM score of 22 to 25 (no signs of ED). Successfully treated patients were followed up for 30 months.

The cohort had a baseline SHIM score of 11.8 (range 5 to 20). Six months following Li-ESWT, 220 patients (51.8%) reported satisfactory sexual intercourse, with a SHIM score of 22 to 25 without the use of phosphodiesterase type 5 inhibitors (PDE5i).

Shorter duration of ED, younger age, lower pretreatment SHIM score, and absence of smoking, obesity, hypertension, diabetes, or hyperlipidemia were significantly associated with improved odds of Li-ESWT success, Dr Adeldaeim and colleagues reported.

At the 30-month follow-up, 168 (76.3%) of the 220 men still reported satisfactory sexual intercourse, with a SHIM score of 22 to 25 without the use of PDE5i, according to the investigators.

All patients had 6 Li-ESWT sessions over 6 weeks. Patients received 6000 shocks at a frequency of 8 Hz at each session. Shock waves were delivered to 5 sites (dorsal surface, both sides, and both crus of the penis).

As part of first-line treatment, healthy men with mild-to-moderate ED should be educated about lifestyle modifications to improve erectile function, the authors noted. "Li-ESWT may be a treatment option in healthy patients with mild-to-moderate ED if lifestyle changes did not improve erectile function. It has not shown any effect in men with severe ED or comorbidities."

Study limitations included lack of a control group receiving sham treatment, the investigators noted. In addition, many patients were originally responsive to treatment with PDE5i, and they did not differentiate between those who responded to the medications prior to Li-ESWT and those who did not.

Reference

Adeldaeim HM, Abouyoussif T, Gebaly OE, et al. Prognostic indicators for successful low-intensity extracorporeal shock wave therapy treatment of erectile dysfunction. Published online December 26, 2020. *Urology*. doi:10.1016/j.urology.2020.12.019