



HOW TO

talk to your patients about penile implants

How should you respond when a patient asks you about penile implants?

Men who are ready to talk about penile implants may have failed many other therapies – they may not believe an implant will work for them. Be sensitive to their objections. The more comfortable you are with the topic, the more relaxed they are likely to feel.

Share the following facts about an AMS 700™ Penile Implant:¹

92% of patients stated that their sexual activity following implantation was “excellent or satisfactory”

95% of implant patients reported “no change or better orgasm” after having the surgery

96% of partners shared that intimacy with an implant was “excellent or satisfactory”

98% of patients reported “satisfactory or excellent erections” after having the procedure

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Let them know that implants look and feel natural. If any of your patients want to hide their implants from their partners, they can do so. They can also participate in sports and change in health club locker rooms without worry.

Everyone who is curious about penile implants should discuss the procedure with an ED specialist (prosthetic urologist) who routinely performs this procedure.

To find a specialist, visit EDCure.org or Surgeo.com

Types of penile implants

3-piece inflatable

These fluid-filled cylinders expand when the user manipulates a pump that is placed in the scrotum

2-piece inflatable

A great option for men with abdominal scarring who may not have enough physical space for the 3-piece option

Malleable

Bendable cylinders are easy-to-position and conceal, even if a man has limited dexterity

About the procedure

- Implant surgery is an outpatient procedure that usually takes about an hour. While under anesthesia, the surgeon makes a small incision at the base of the penis or in the scrotum and inserts the implant. Most men have minimal discomfort during the healing process, can return to their normal activities after a week, and are able to resume intercourse after 6 weeks.
- In a study of over 55,000 AMS 700™ Penile Implants, 94.1% were free from mechanical failure at 7 years.² Many insurance carriers cover this procedure. Patients should discuss the cost with their prosthetic urologist and their insurance carrier.
- The AMS 700™ Series Inflatable Penile Prosthesis is intended for use in the treatment of chronic, organic, male erectile dysfunction (impotence). These devices are contraindicated in patients who have active urogenital infections or active skin infections in the region of surgery (or for the AMS 700 with InhibiZone™ have a known sensitivity or allergy to rifampin, minocycline, or other tetracyclines). Implantation will make latent natural or spontaneous erections, as well as other interventional treatment options, impossible. Men with diabetes, spinal cord injuries, or open sores may have an increased risk of infection. Failure to evaluate and treat device erosion may result in infection and loss of tissue. Implantation may result in penile shortening, curvature, or scarring.

Possible adverse events include, but are not limited to, urogenital pain (usually associated with healing), urogenital edema, urogenital ecchymosis, urogenital erythema, reservoir encapsulation, patient dissatisfaction, auto-inflation, mechanical malfunction, and impaired urination. Prior to using these devices, please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions, and potential adverse events.

For additional information, visit EDCure.org

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1. Montorsi F, Rigatti P, Carmignani G, et al. AMS three-piece inflatable implants for erectile dysfunction: a long-term multi-institutional study in 200 consecutive patients. *Eur Urol.* 2000 Jan;37(1):50-5.

2. Enemchukwu EA, Kaufman MR, Whittam BM, et al. Comparative revision rates of inflatable penile prostheses using woven Dacron® fabric cylinders. *J Urol.* 2013 Dec;190(6):2189-93.



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MH-397504-AA JUL 2016