

TREATMENT OPTIONS FOR ED

More than half of men over 40 have erectile dysfunction (ED).¹ ED can be equally devastating for a man and for his partner. There is hope for every man with ED to regain the confidence, control and wholeness to enjoy an active, satisfying sex life.²

Oral medications (e.g., Viagra™, Cialis™, Levitra™ and Spedra™) are often the first step; however, 30% of men with ED do not respond adequately to pills and require a different option.³⁻⁶

It's important to know there are treatment options beyond medications that are safe and effective. Each option has varying degrees of success and reliability, and some may be more effective or satisfying for you than others.

A penile implant is a unique, permanent solution because it allows you to have intimacy wherever, whenever and for as long as you want. It allows you to be spontaneous again and is reliable with no medication side effects or ongoing costs. It's entirely contained inside the body and doesn't typically interfere with ejaculation or orgasm.^{7,8}

Penile implants have been in clinical use for over 40 years and have helped hundreds of thousands of patients return to an active, satisfying sex life.^{9,10}

TAKE THE NEXT STEP

Erectile dysfunction (ED) can limit your intimacy, affect your self-esteem and impact your relationship with your partner.⁸ But there's good news – today, nearly every case of ED is treatable. Learn more about the treatments available at EDTreatments.com

- Talk with a urologist who specializes in ED and offers the full range of treatment options, including implants. Need help finding an experienced doctor near you? Visit our "Find an Implanter" feature at EDTreatments.com

- Watch real patient stories at EDTreatments.com

Because each type of treatment option offers unique features, potential risks and benefits, talk to your doctor about which option is best for you. Learn more at EDTreatments.com

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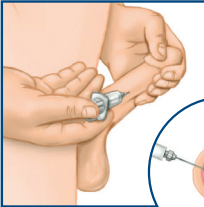
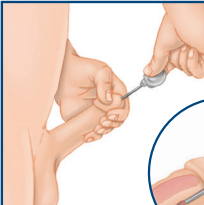
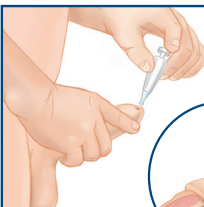
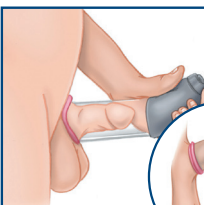
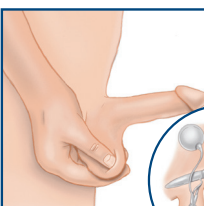
Your treatment options for erectile dysfunction

A PATIENT OVERVIEW



OVERVIEW OF TREATMENT OPTIONS FOR ED BEYOND ORAL MEDICATIONS

(Individual results may vary. Consult with your doctor to decide the option most suited for you.)

	Patient satisfaction and outcomes	Possible side effects	Product characteristics	Typical duration of use
 <p>SELF-INJECTIONS</p> <p>In use since the 1980s, injection therapy uses a needle to inject medication directly into the base or side of the penis. These medications improve blood flow into the penis to cause an erection.</p>	<ul style="list-style-type: none"> 60% of patients were satisfied and continued use¹¹ Satisfaction for men and partners at 4 years was 91.4%¹² Clinical studies report 60 – 86% success rates^{12,13} 	<ul style="list-style-type: none"> Penile pain^{12,14} Prolonged erection Penile fibrosis Injection site hematoma Penile curvature Palpable plaque 	<ul style="list-style-type: none"> Injected with a needle into the corpus cavernosum¹⁴ Onset of erection: 5 – 20 mins Refrigeration required 	<ul style="list-style-type: none"> Despite success rates, in a study of 294 men, only 59 (20%) continued the therapy¹² 107 (45.5%) men discontinued at 6 months, and 151 (64.2%) men discontinued at 12 months¹² Another study found 40% drop-out rate at 12 months, and 70% at 43 months for post-prostatectomy patients¹⁵
 <p>INTRAURETHRAL SUPPOSITORIES</p> <p>In use since the 1990s, intraurethral suppository treatment for ED uses an applicator containing a small pellet that is inserted into the urethra. Once the pellet is released, it dissolves to increase blood flow to the penis to form an erection.</p>	<ul style="list-style-type: none"> Clinical study satisfaction rates are limited, but one study found 64 of 192 men (33%) were satisfied¹⁶ In clinical literature, success rates are reported at 40 – 65%^{17,18} 	<ul style="list-style-type: none"> Penile pain¹⁹ Urethral pain or burning Urethral bleeding/spotting Dizziness Hypotension 	<ul style="list-style-type: none"> No needles¹⁹ Onset of erection: 5 – 10 minutes Refrigeration required 	<ul style="list-style-type: none"> In one study of 54 patients, over half discontinued use after 8 months²⁰ Another clinical study reported 40 – 50% of men don't continue using this therapy after 6 – 8 months¹⁵
 <p>TOPICAL CREAMS</p> <p>In use since August 2013²¹, topical creams (such as Vitaros™) are prescribed in the form of disposable, individual applicators. A drop is applied to the tip of the penis. The alprostadil within the cream causes the blood vessels to widen so there is an increase in the blood flow into the penis, which leads to an erection²².</p>	<ul style="list-style-type: none"> A statistically significant overall improvement was observed in three treatment groups in erectile function and increased success in vaginal penetration and ejaculation²¹. There were overall improvements in orgasmic function, intercourse satisfaction and overall satisfaction²². 	<ul style="list-style-type: none"> Irritation, burning sensation or itching around your and/or your partner's genitals²² Dizziness Fluid accumulation in the penis Most side effects will disappear within a few hours 	<ul style="list-style-type: none"> Supplied in mini pipettes filled with a single dose of cream²² Apply cream to the opening of the penis, according to use instructions Onset is within 5 – 30 minutes after application Duration is approximately 1 – 2 hours 	<ul style="list-style-type: none"> Newer therapy so longer term data is not yet freely available
 <p>VACUUM ERECTION DEVICES (VEDs)</p> <p>In use since the 1980s, a vacuum erection device consists of a hollow plastic tube, a vacuum pump and a tension ring. With the tube placed over the penis, the pump creates a vacuum that pulls blood into the penis. Once an erection is achieved, an elastic tension ring is placed at the base of the penis to help maintain the erection.</p>	<ul style="list-style-type: none"> VED patient satisfaction rates range from 68 – 80%²³ VED success rates range from 80 – 92% after radical prostatectomy¹⁵ 	<ul style="list-style-type: none"> Penile bruising/burst blood vessels²⁴⁻²⁶ Penile pain/discomfort Penile numbness Delayed ejaculation or failure to ejaculate Cool or different-colored erection 	<ul style="list-style-type: none"> Non-invasive²⁷ Drug free Cost effective 	<ul style="list-style-type: none"> Despite initial high success rates, in a study of 85 patients, 73 of 85 (86%) decided to move onto other sexual aids¹⁵
 <p>PENILE IMPLANTS</p> <p>In use since the 1970s, penile implants have helped hundreds of thousands of men return to an active sex life.²⁸ A penile implant is a medical implant that is implanted into the penis during an outpatient procedure. The implant is entirely concealed within the body. To operate, one squeezes and releases the pump, located in the scrotum, to achieve an erection. To return the penis to a natural flaccid state, the deflate button located on the pump bulb is depressed.</p>	<ul style="list-style-type: none"> 184 of 200 men (92%) said sexual activity with the implant was “excellent” or “satisfactory”²⁹ 115 of 120 partners (96%) said sexual activity with the implant was “excellent” or “satisfactory”²⁹ 196 of 200 patients (98%) reported erections to be “excellent” or “satisfactory”²⁹ 97% of patients would recommend a penile implant to a friend²⁸ 	<ul style="list-style-type: none"> Latent, natural erections no longer possible²⁹ Infection (<1% risk) requires removal of device Mechanical failure Pain (typical with healing process) 	<ul style="list-style-type: none"> Permanent ED treatment²⁹ Concealed within the body Maintain erection as long as desired Spontaneous sex when the mood strikes Doesn't interfere with orgasm or ejaculation 	<ul style="list-style-type: none"> 98% of penile implants are in use after 1.5 to 5 years²³⁰ At 7 years, 94% are still in use and free from revision³¹