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 Stendra™) 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 easy to use, 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.[6] But there's good news–today, nearly every case of ED is treatable. Learn more about the treatments available at **www.EDCure.org**.

- 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 a Specialist" feature at www.EDCure.org or contact a Patient Education Coordinator at MHPatientEducation@bsci.com or 1-844-4ED-CURE (1-844-433-2873).
- Talk to someone who's been there:
  - Visit www.PatientPerspectives.org to speak with patients and partners who have been in your shoes
  - Watch real patient stories at www.EDCure.org or
  - Email us at MHPatientEducation@bsci.com or call 1-844-4ED-CURE (1-844-433-2873) and talk to a patient who found a successful treatment for his ED

*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 **www.EDCure.org**.*

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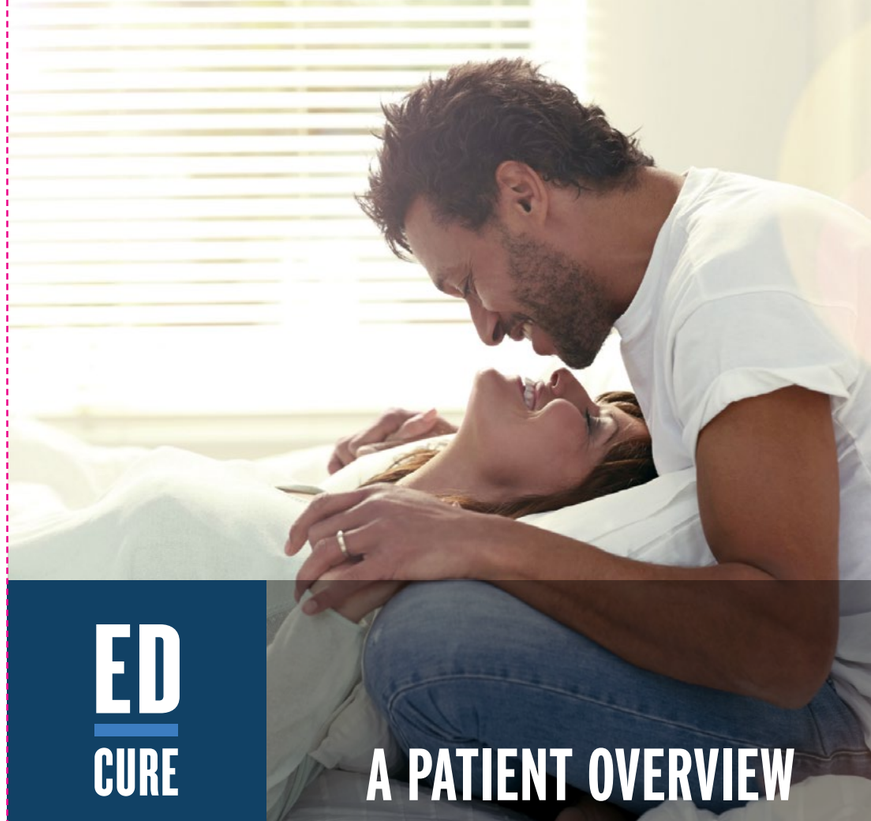


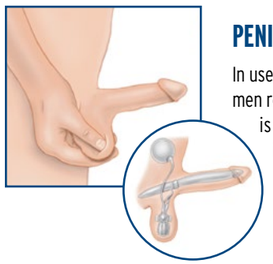
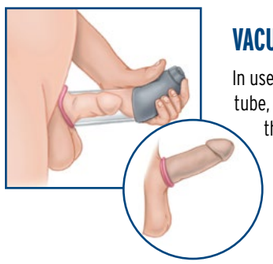
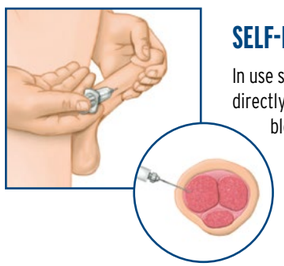
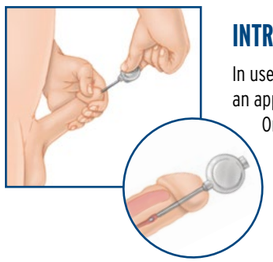
ED CURE

A PATIENT OVERVIEW

Your treatment options for **erectile dysfunction**

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
 **PENILE IMPLANTS** In use since the 1970s, penile implants have helped hundreds of thousands of men return to an active sex life.[10] 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.	• 184 of 200 men (92%) said sexual activity with the implant was "excellent" or "satisfactory"[7] • 115 of 120 partners (96%) said sexual activity with the implant was "excellent" or "satisfactory"[7] • 196 of 200 patients (98%) reported erections to be "excellent" or "satisfactory"[7] • 97% of patients would recommend a penile implant to a friend[11]	• Latent, natural erections no longer possible • Infection (<1% risk) requires removal of device • Mechanical failure • Pain (typical with healing process) [12]	• Permanent ED Treatment • Concealed within the body • Maintain erection as long as desired • Spontaneous-sex when the mood strikes • Doesn't interfere with orgasm or ejaculation [12]	• 98% of penile implants are in use after 1.5 to 5 years[7,13] • At 7 years, 94% are still in use and free from revision[14]
 **VACUUM ERECTION DEVICES (VEDS)** 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.	• VED patient satisfaction rates range from 68-80%[15] • VED success rates range from 80 - 92% after radical prostatectomy[16]	• Penile bruising/burst blood vessels • Penile pain/discomfort • Penile numbness • Delayed ejaculation or failure to ejaculate • Cool or different colored erection [17-19]	• Non-invasive • Drug free • Cost effective [20]	• Despite initial high success rates, in a study of 85 patients, 73 of 85 (86%) decided to move onto other sexual aids[16]
 **SELF-INJECTIONS** 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.	• ~60% of patients were satisfied and continued use[21] • Satisfaction for men and partners at 4 years was 91.4%[22] • Clinical studies report ~60-86% success rates[22,23]	• Penile pain • Prolonged erection • Penile fibrosis • Injection site hemotoma • Penile curvature • Palpable plaque [22, 24]	• Injected with a needle into the corpus cavernosum • Onset of erection: 5-20 mins • Refrigeration required [24]	• Despite success rates, in a study of 294 men, only 59 (20%) continued the therapy[22] • 107 (45.5%) men discontinued at 6 months, and 151 (64.2%) men discontinued at 12 months[22] • Another study found 40% drop out rate at 12 months, and 70% at 43 months for post prostatectomy patients[16]
 **INTRAURETHRAL SUPPOSITORIES** 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.	• Clinical study satisfaction rates are limited, but one study found 64 of 192 men (33%) were satisfied[25] • In clinical literature, success rates are reported at 40-65%[26,27]	• Penile pain • Urethral pain or burning • Urethral bleeding/spotting • Dizziness • Hypotension [28]	• No needles • Onset of erection: 5-10 minutes • Refrigeration required [28]	• In one study of 54 patients, over half discontinued use after 8 months[29] • Another clinical study reported 40-50% of men don't continue using this therapy after 6-8 months[16]