
Male and Female Sexual Function and Dysfunction; Andrology

Re: Finasteride, Not Tamsulosin, Increases Severity of Erectile Dysfunction and Decreases Testosterone Levels in Men with Benign Prostatic Hyperplasia

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Horm Mol Biol Clin Investig 2015; 23: 85–96. doi: 10.1515/hmbci-2015-0015.

Abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/26053014>

Editorial Comment: This study is interesting as it demonstrates the negative effects of finasteride on male erectile function using an objective questionnaire. In this retrospective registry study a cohort of 470 men 47 to 68 years old (mean \pm SD 57.78 \pm 4.81) were treated with 5 mg finasteride daily. A second cohort of 230 men 52 to 72 years old (mean \pm SD 62.62 \pm 4.65) were treated with 0.4 mg tamsulosin. All men were followed for 45 months. At intervals of 3 months and at each visit plasma testosterone (T) level was measured and the International Index of Erectile Function questionnaire, erectile function domain score was determined. Long-term treatment with finasteride therapy is associated with worsening of erectile dysfunction (ED), as shown by the significant decrease in the International Index of Erectile Function, erectile function domain scores in men treated with finasteride. No worsening of ED was observed in men treated with tamsulosin. The increase in ED due to finasteride did not resolve with continued treatment with finasteride. Most importantly long-term finasteride therapy resulted in reduction in total T levels, contributing to a state of hypogonadism. By comparison, no changes in T levels were noted in men treated with tamsulosin.

The negative impact of finasteride on erectile function is noteworthy. The authors did not study ejaculatory function, which may have shown a negative effect using either drug. The data demonstrate that finasteride has a negative impact on male erectile function. Ejaculatory function and libido were not examined.

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Suggested Reading

Fwu CW, Eggers PW, Kirkali Z et al: Change in sexual function in men with lower urinary tract symptoms/benign prostatic hyperplasia associated with long-term treatment with doxazosin, finasteride and combined therapy. *J Urol* 2014; **191**: 1828.

Trauma, and Genital and Urethral Reconstruction

Re: Complications following Artificial Urinary Sphincter Placement after Radical Prostatectomy and Radiotherapy: A Meta-Analysis

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BJU Int 2015; **116**: 623–633. doi: 10.1111/bju.13048.

Abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/25601072>

Editorial Comment: This review attempts to definitively evaluate the cumulative evidence of dozens of reports highlighting artificial urinary sphincter complications in cases with and without