

ORIGINAL RESEARCH—COUPLES' SEXUAL DYSFUNCTIONS

Unsuccessful Investigation of Preoperative Sexual Health Issues in the Prostate Cancer “Couple”: Results of a Real-Life Psychometric Survey at a Major Tertiary Academic Center

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ABSTRACT

Introduction. Investigating preoperative sexual function of patients with prostate cancer (PCa) and their partners is needed for realistic functional outcome analyses after radical prostatectomy (RP).

Aim. To assess pre-RP sexual health issues of PCa patients and their partners in a stable heterosexual relationship.

Methods. Data were analyzed from 3,282 consecutive patients who underwent RP over a three-period survey. During Period 1, on admission to the hospital the day prior to surgery, 1,360 patients were asked to complete the International Index of Erectile Function (IIEF). During Period 2, 1,171 patients were asked to complete the preoperative IIEF; similarly, patients' partners were invited to complete the Female Sexual Function Index (FSFI). Lastly, during Period 3, only candidates for RP were asked to fill in the IIEF.

Main Outcome Measures. To assess the rate of patients who completed the questionnaire during the three-period survey. To detail the proportion of patients' partners who filled in the questionnaire, along with the partners' reasons for non-adherence to the proposed investigation during Period 2.

Results. A small rate of men completed the IIEF during Period 1 (583 in 1,360 [42.9%]), Period 2 (290 in 1,171 [24.8%]), and Period 3 (261 in 751 [34.8%]) (χ^2 trend: 13.06; $P = 0.0003$). In this context, a significantly lower proportion of patients completed the questionnaire during Period 2, as compared with both Period 1 (χ^2 : 95.13; $P = 0.0001$) and Period 3 (χ^2 : 21.87; $P < 0.0001$). Only 82 in 1,171 (7.0%) partners completed the FSFI over Period 2. Moreover, only 6 in 82 (7.3%) of women provided complete data.

Conclusions. The investigation of sexual health issues of both partners prior to RP is largely unsuccessful. In this context, the prevalence of incomplete data collection is high, and these results demonstrate that contemporaneously investigating the sexual health issues of both partners significantly increases the prevalence of incomplete data collection. Salonia A, Zanni G, Gallina A, Briganti A, Saccà A, Suardi N, Matloob R, Da Pozzo LF, Bertini R, Colombo R, Rigatti P, and Montorsi F. Unsuccessful investigation of preoperative sexual health issues in the prostate cancer “couple”: results of a real-life psychometric survey at a major tertiary academic center. *J Sex Med* 2009;6:3347–3355.

Key Words. Prostatectomy; Couple; Sexual Function; Prostate Cancer; IIEF; FSFI

Introduction

Radical prostatectomy (RP) is considered the standard treatment for patients with clinically localized prostate cancer (PCa) and a life expectancy of at least 10 years [1]. Overall, the number of

RPs has been increasing annually, and at present, many patients are treated at younger ages [2,3]. In this context, preserving a good health-related quality of life (HRQoL) after surgery is gaining increasing importance [4,5]. Indeed, RP may be associated with treatment-specific sequelae, with

erectile dysfunction (ED) [6–8] being the most prevalent.

Phosphodiesterase type 5 inhibitors (PDE5s) are utilized as an efficacious and safe treatment for post-RP ED in properly selected patients [6,7]. However, despite the effectiveness of ED treatment, at least in some centers 30% to 75% of patients discontinue use of assistive aids within 1 year during the postoperative period [9,10]. Likewise, a significant number of those men preoperatively self-reporting to be fully potent and strongly motivated to maintain postoperative erectile function (EF) decide not to even begin treatment with an ED compound upon discharge from the hospital [10]. Current research exploring this gap between effectiveness and ongoing use supports the need to take a broader perspective of sexual dysfunction emphasizing several factors, including a couple's sexual and intimate relationship during the preoperative period [9,11,12].

Therefore, in order to psychometrically assess a number of preoperative parameters concerning sexual health issues in candidates for radical retropubic prostatectomy (RRP), we planned to use a number of self-administered validated instruments for both patients and their partners consecutively attending a major tertiary academic center. However, the clinical observation of significant difficulties in distributing to patients and their partners such a set of psychometric tools prompted us to analyze the actual number of questionnaires' responders throughout a 6-year time frame. This article reports the results of a clinical survey on sexual aspects in candidates for RRP from 2002 through 2008.

Materials and Methods

From November 2002 to October 2008, 3804 consecutive European Caucasian PCa patients underwent RRP at our institution. Upon admission the day prior to surgery, each patient was comprehensively assessed with a detailed medical and sexual history by a male staff physician. To provide a frame of reference for objectively interpreting surgical outcomes, we also asked all patients to complete a set of validated questionnaires, including the International Index of Erectile Function (IIEF) domain scores [13]. All instruments were self-administered in a clinical setting; in this context, the post-completion questionnaires collection was performed by the staff physicians prior to the patient's discharge from the hospital in all cases.

All patients were investigated regarding their marital or stable sexual relationship status, and, for the specific purpose of the analysis, only men with a stable sexual relationship were considered. A stable sexual relationship status was defined as the patient's having had the same partner for 12 or more consecutive months.

For the aims of this study, the evaluated 6-year time frame was stratified into three periods. From November 1, 2002, to April 20, 2005 (Period 1), on admission to the hospital, patients were asked to complete the IIEF domain scores. From May 1, 2005, to April 30, 2007 (Period 2), both patients and their partners were asked to fill in a set of validated instruments, including the IIEF for the patients and the Female Sexual Function Index (FSFI) [14] for their partners. Patients and their partners received the psychometric tool at the same time by the same staff urologist; likewise, patients and their partners could fill the questionnaires in a separate setting. From May 1, 2007, to October 30, 2008 (Period 3), patients were assessed only in terms of sexual functioning, thus completing the IIEF.

Main Outcome Measures

The primary end-point of the present study was to descriptively assess the rate of patients with a stable heterosexual relationship who completed the psychometric instrument according to the three-period survey. The secondary end-point was to detail the rate of patients' partners who filled the questionnaire in, along with reasons for non-adherence to the proposed sexual health issues investigation.

Statistical Analyses

Data abstraction was performed by two different abstractors on 100% of medical records at office admission. The data quality analysis showed an error rate of 0.6%.

Data are presented as means (standard deviation [SD]). The statistical significance of differences in means and proportions were tested using the two-tailed Student's *t*-test and the χ^2 test, respectively. All statistical tests were performed using S-Plus Professional, version 1 (MathSoft Inc., Seattle, WA, USA). For all statistical comparisons, significance was defined as $P < 0.05$.

The study was approved by our Ethics Committee, and all patients signed an informed consent agreeing to deliver their own anonymous information for future studies.

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