Penile Injections to enable Erection when PDE5 inhibitors and VED are not effective

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Disclaimer: Please recognize that I am not a Medical Doctor. I have been an avid student researching and studying prostate cancer as a survivor and continuing patient since 1992. I have dedicated my retirement years to continued research and study in order to serve as an advocate for prostate cancer awareness, and, from a activist patient's viewpoint, to help patients, caregivers, and others interested develop an understanding of prostate cancer, its treatment options, and the treatment of the side effects that often accompany treatment. Readers of this paper must understand that the comments or recommendations I make are not intended to be the procedure to blindly follow; rather, they are to be reviewed as my opinion, then used for further personal research, study, and subsequent discussion with the medical professional/physician providing prostate cancer care.

The following provides information regarding penile injections to provide an erection when the use of a PDE5 inhibitor (Viagra, Levitra, or Cialis) appears to be little to no help (please note that it requires near daily (or every-other day for Cialis) use to provide regular and sufficient arterial blood flow for rehab of penile tissue).

Information in this url describes the use of a Vacuum Erection Device (VED) to exercise the penis to preserve/return length/girth thus preventing atrophy (shrinking) of the penis: http://tinyurl.com/artg62p. However, please note that the VED (covered by Medicare) only draws in venous blood during this exercise, wherein it is arterial blood flow that is necessary to provide rehabilitation of the penis following various treatments for prostate cancer.

Information in this url regarding penile rehab is lengthy but quite comprehensive in understanding what causes erectile dysfunction resulting from treatment for prostate cancer, procedures to hopefully bring a return of natural erection, and more immediate procedures for both rehab of the penis as well as medically assisted erectile function: http://tinyurl.com/3oz7u8l

Injections certainly work well and do not hurt. Many men reject the idea because they think sticking a needle into their penis would hurt. The needles are very thin and your urologist should provide you a prescription for the mix along with instruction on the appropriate place to inject. The only downside is going through

the motions to bring on the erection while the partner is all primed for intercourse. The "upside" (pun intended) is that very good erections result.

INJECTIONS (PAPAVERINE/BIMIX/TRIMIX)

The following websites describe penile injection therapy for erectile dysfunction:

http://www.urologicalcare.com/other-ed-treatments/penile-injection-therapy/

http://www.urologicalcare.com/other-ed-treatments/diagrams/

Patient Guide to Penile Injections:

 $\frac{http://www.ucsfhealth.org/adult/medical_services/urology/male_sexual/injections.}{html}$

Successful Self Penile Injection Hints, Questions and Answers

http://www.ustoo.com/PDFs/Injection.pdf

A prostate cancer survivor who has involved himself in research and study of penile injections and the use of papaverine, Bimix, or Trimix is Michael Holland. He often posts on the pcai@prostatepointers support list in this regard and can be contacted directly for advice and concerns regarding this procedure and appropriate use of the products to be injected. His email address is michaelmaumfh@hotmail.com. If interested in subscribing to the PCAI (Prostate Cancer and Intimacy) support list, here is info:

Prostate Cancer and Intimacy

PCAI is a mailing list for frank and open discussion of the sexual issues surrounding PCa. To subscribe, go to:

http://www.prostatepointers.org/mailman/listinfo/pcai

Following are references to purchasing Viagra, Levitra, or Cialis online at reduced expense:

Viagra/sildenafil: http://allrx.org/buy-viagra-usa.html

Levitra/vardenafil: http://allrx.org/buy-levitra-usa.html Cialis/tadalafil: http://allrx.org/buy-cialis-usa.html

Explanation of which penile injection product to use and cost considerations taken from http://www.medscape.com/viewarticle/551563_3:

The final reason for a change from Edex or Caverject Impulse to either generic prostaglandin E1 or multiagent therapy is cost. Edex and Caverject cost an average of \$33 to \$38 per injection for doses of 20 mcg. The same dose of generic compounded prostaglandin E1 is approximately \$8 to \$10 per injection from a compounding pharmacy. A 1 ml dose (which is actually a maximal dose) of trimix or quadmix costs about \$12 to \$15 per dose. Most patients utilize lower doses of 0.2 to 0.5 mls, which reduces the cost further. Patients for whom insurance will not cover medication and who cannot afford the cost of medication may be switched to generic prostaglandin E1 or multi-agent mixtures. Costs for intracavernosal injections are shown here:

Table 1. Injectable Medication Costs		
Injectable Agent	Cost	Source
Edex 20 mcg	\$33-\$38 per injection	Drugstore.com; Walgreens
Caverject Impulse 20 mcg	\$33-\$38 per injection	Drugstore.com; Walgreens
Prostaglandin E1 Compounded 20 mcg	\$8-\$10	Prescription Innovations of America; California Compounding
Trimix (prostaglandin E1 10 mcg, phentolamine 1 mg, papaverine 30 mg)	\$2-\$18 depending on dose	Prescription Innovations of America; California Compounding
Quadmix (prostaglandin E1 10 mcg, phentolamine 1 mg, papaverine 30 mg, atropine 0.15 mg)	\$2-\$20 depending on dose	Prescription Innovations of America; California Compounding

Your Urologist should both direct the initial product to be injected, have a sample available at his facility, explain the injection procedure, and actually have you perform that initial injection while in his treatment room to both know how, as well experience that initial injection. He will/should then write you a prescription for

the product that you can then contact various local pharmacies to determine least cost, or use the information in the foregoing Table 1.