

# Post-Operative Assessment of Semi Rigid Penile Prosthesis Implantation Surgery Type Coloplast

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**Abstract:** Erectile dysfunction (ED) affects 50% of men older than 40 years, exerting substantial effects on quality of life, many older men become unresponsive to medical therapy due to the development and/or progression of their medical co-morbidities, and therefore require penile prostheses implantation to remain sexually active. The aim of the study is to do an assessment on possible complications and disadvantages that face patients underwent coloplast penile implant surgery as well as patient and partner satisfaction. The method in the current study include 32 patients, 29–72 years old male (mean age 56.78 y), who underwent malleable penile prostheses insertion type (coloplast), all are married and their wives 22–57 y old (mean age 39.5 y). The surgery was performed between January 2016 and July 2017 at the Department of Andrology, Al masaraahospital. A retrospective review of clinical records of the study patients and chart review was performed, patients were contacted by phone and asked to return with their wives to the Andrology department, so that the prosthesis could be checked and possible problems addressed. Additionally, a 10-question questionnaire designed by Moskovic et al and his colleagues in USA 2011, and used later on by Abdulla Al Ansari et al and his team in Doha, Qatar in a study for the assessment of patient and partner satisfaction after penile prosthesis implantation in 2013. **Conclusion:** The coloplast tube malleable penile prosthesis is reliable and safe in the surgical treatment of ED.

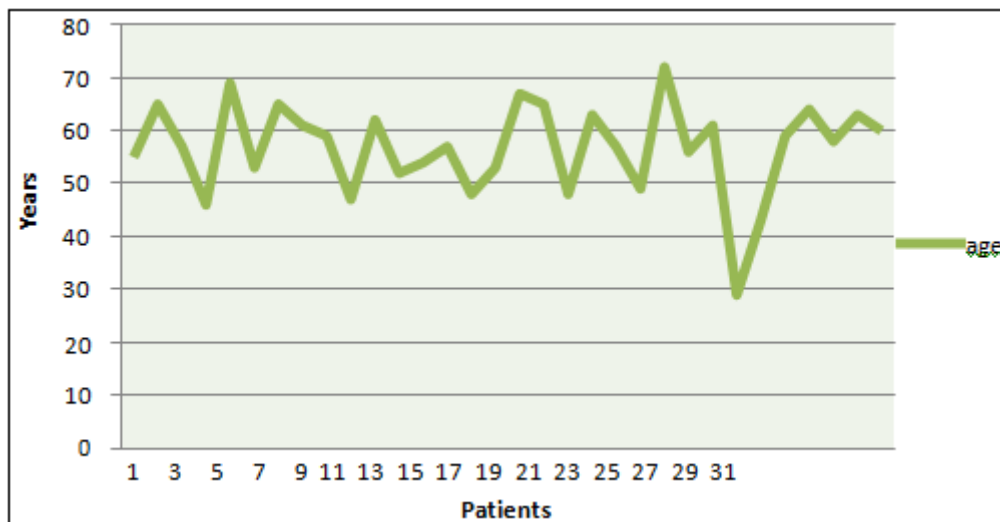
**Keywords:** erectile dysfunction, semi rigid penile prostheses, patient satisfaction, and delayed complications

## 1. Results

**Table 1** The mean and SD of the age of inclusion bodies

The results shows that the mean of age is about 56 years (Table 1)

Table (1) Age	
Mean	56.78
Std. Deviation	8.71



**Graph 1:** Linear graph showing age distribution

In Table (2) the mean is vary significantly between different groups.

**Table 2 responses to the questionnaire administered to patients and their sexual partners**

Questions for Patients	Sample size	min	max	mean	Std. Deviation	median
1 <sup>st</sup> Q score	32	1	5	3.16	1.17	3
2 <sup>nd</sup> Q score	32	1	5	3.16	1.08	3
3 <sup>rd</sup> Q score	32	1	5	3.34	1.21	3
4 <sup>th</sup> Q score	32	1	5	3.31	1.20	3
5 <sup>th</sup> Q score	32	1	5	3.25	1.24	3
6 <sup>th</sup> Q score	32	1	5	3.22	1.01	3
7 <sup>th</sup> Q score	32	1	5	3	1.02	3
frequency / month	32	1	8	4.94	2.38	5

\*1-5 (1-very unsatisfied, 2-moderately unsatisfied, 3-satisfied, 4-moderately satisfied, 5-very satisfied)

## 2. Conclusions & Recommendation

Penile prosthesis surgery is an excellent treatment option when less invasive approaches fail to improve erectile function, particularly since the advances in the design of prosthetic devices. Although device infection and complications remain significant challenges, the use of meticulous surgical technique to minimize surgical time and to ensure optimal sterility makes this method a successful approach to treating ED

The Coloplast tube malleable penile prosthesis is reliable and safe in the surgical treatment of ED, but the present results emphasize the need for proper preoperative counseling for both the patient and his partner, to avoid unrealistic expectations of penile prosthesis. This should be combined with careful evaluation of both psychosocial and psychosexual interactions of the couple based on cultural ethnic background, since couple selection may be viewed as the key factor for long-term success of prosthetic implantation.

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