FREQUENTLY ASKED QUESTIONS

Q. What if the oral medication don't work?

A. At the Men's Health Clinic, we have many alternatives to offer you if oral medications are not effective following your radical prostatectomy. These alternatives include vacuum erection device, intraurethral suppository, penile injection therapy, and surgery.

Q. Do you have resources for intimacy following the procedure?

A. There are excellent resources available for you and your partner. Check out TrueNorth, from the Movember Foundation. They offers educational videos and a sexual recovery program, for you and your partner.

https://sr.us.truenth.org

Q. What type of vacuum erection device should I buy?

A. We recommended researching the different devices available to you online. We recommend purchasing a device that has a hand pump, with a penile constriction ring. More expensive models are not necessarily better, and you should consider spending less than \$100 for a model. Also be sure the vacuum erection device is an appropriate size.

Men's Health Clinic

Brigham and Women's Faulkner Hospital 1153 Centre Street Jamaica Plain, MA 02130 Phone Number: 617-983-4850

Urology Locations

Brigham and Women's Hospital 45 Francis Street, ASB II-3 Boston, MA 02115

Brigham and Women's/Mass General Health Care Center at Foxborough 20 Patriot Place Foxborough, MA 02035

Contact Information

Urology Main Line: (617) 732-6325, 8am-5pm **After Hours Emergencies:** (617) 732-6660 ask for Urology Resident on-call to be paged

brighamandwomens.org/urology

PATIENT INSTRUCTIONS AND INFORMATION

Pre-Prostatectomy



Patient education about what to expect following a radical prostatectomy



Erectile Function

- Take the prescribed oral medication, either sildenafil or tadalafil, at least once weekly.
- You can use the medication, on demand daily for intercourse. Sildenafil is best used on an empty stomach.
- Most common side effects:
 - Flushing, headache, and "blue vision"
- DO NOT use while taking nitrate medications, which is a medication commonly used for chest pain.

Medication Schedule

- Start the oral medication 1-2 weeks prior to your scheduled surgery
- Do not re-start the medication until the urethral catheter is removed, generally 7-10 days following surgery
- Continue to take medication weekly following catheter removal. You may transition to on demand use if erectile function returns.
 - Please avoid sexual activity for 6-8 weeks following surgery.
- If erectile function has not returned by 3 months and you are interested in alternative therapies, please contact the Men's Health Clinic using the contact information listed on the back.

Vacuum Erection Device

- Following a radical prostatectomy, regular use of the vacuum erection device is recommended to increase blood flow to the penile tissue and maintain penile length.
- Types of pumps
 - Hand pump vs. battery operated pump
- Common Side effects
 - Bluish penile tissue and discomfort with the suction
- If you would like to use a vacuum erection device for intercourse 6-8 weeks following surgery, be sure to buy a device with a penile constriction ring.
 - The constriction ring must not be used for longer than 30 minutes.

Device instructions:

- Move the pubic hair directly on the penis and around the root of the penis.
 - The device must fit the skin tightly.
- Apply some lubricant to the edge of the ring loader.
- Introduce the penis through the ring loader into the cylinder.
- Press the device tightly to your body.
- Use the pump to remove air from the cylinder.

Pelvic Floor Exercises

- We recommend you consider an evaluation with a pelvic floor physical therapist prior to surgery.
- This initial evaluation will determine if the pelvic floor muscles are functioning properly and they will teach you how to perform pelvic floor (Kegel) strengthening exercises.
- Kegel exercises are an important exercise to help regain urinary control following surgery.
- Patients may have improved outcomes with a pre-operative evaluation with physical therapy.

Pelvic floor exercise schedule

- Initial evaluation with pelvic floor physical therapy prior to surgery
- Perform Kegel exercises 10 times per day, up until the day of surgery.
 - Do 10 sets per time, holding for 5 -10 seconds
- Start performing Kegel exercises after urethral catheter removal in a similar fashion
- Per patient interest, follow up with physical therapy 6-8 weeks following surgery to improve urinary control