

**Penile Implants Commissioning Statement**

Statement number: 34

<b>Treatment</b>	Penile Implants
<b>For the treatment of:</b>	Erectile Dysfunction
<b>Background</b>	A penile prosthesis is another treatment option for men with erectile dysfunction (ED). These devices are either malleable or inflatable. The simplest type of prosthesis consists of a pair of malleable (bendable) rods surgically implanted within the erection chambers of the penis.
<b>Commissioning position</b>	NHS Vale of York CCG does not routinely commission penile implants (protheses) for treating erectile dysfunction (ED).  Funding will only be considered by NHS Vale of York CCG Individual Funding Request Panel (IFR) where exceptional clinical circumstances are demonstrated. These might include men with sexual dysfunction after radical treatment for prostate cancer <sup>3</sup> .
<b>Summary of evidence / rationale</b>	Erectile dysfunction (ED) is defined as the persistent inability to attain and maintain an erection sufficient to permit satisfactory sexual performance. It is more common in older men, affecting about half the male population of 40–70 years of age.  There is considerable evidence that adequate levels of testosterone are required for ED therapies, especially phosphodiesterase type 5 (PDE5) inhibitors, to achieve maximal response and in many cases normalisation of testosterone levels can restore erectile function.  PDE5 inhibitors are effective in approximately 75% of patients, but for non-responders alternative therapies are available including vacuum erection devices, intracavernous or intraurethral injections, or as a possible third line therapy, a penile implant.  NICE CG 175 includes the following advice on managing sexual dysfunction following radical treatment for prostate cancer:  1.3.31 Ensure that men have early and ongoing access to specialist erectile dysfunction services  1.3.32 Offer men with prostate cancer who experience loss of erectile function phosphodiesterase type 5 (PDE5) inhibitors to improve their chance of spontaneous erections  1.3.33 If PDE5 inhibitors fail to restore erectile function or are contraindicated, offer men vacuum devices, intraurethral inserts penile injections, penile protheses as an alternative or approved topical treatments.  A Cochrane Review from 2007 <sup>4</sup> mainly covered the effectiveness of PDE5 and did not mention penile implants.
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<b>Author</b>	Catherine Lightfoot, Clinical Triage Lead, Yorkshire and Humber Commissioning Support
<b>Responsible officer</b>	Shaun O'Connell, GP Lead <a href="mailto:valeofyork.contactus@nhs.net">valeofyork.contactus@nhs.net</a>

**References:**

1. NHS Evidence - Clinical Knowledge Summaries ; Erectile Dysfunction  
<http://cks.nice.org.uk/erectile-dysfunction>
2. Guidelines on the management of erectile dysfunction, British Society for Sexual Medicine (BSSM) 2009. [http://www.bssm.org.uk/downloads/BSSM\\_ED\\_Management\\_Guidelines\\_2009.pdf](http://www.bssm.org.uk/downloads/BSSM_ED_Management_Guidelines_2009.pdf)
3. NICE CG 175 Prostate cancer: diagnosis and treatment January 2014  
<http://www.nice.org.uk/guidance/cg175/chapter/1-recommendations>
4. Interventions for sexual dysfunction following treatments for cancer. Cochrane Review 2007 <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD005540.pub2/abstract>