INTRODUCTION: The aim of this national study was to evaluate ED management after RPX (without any postoperative adjuvant therapy or tumor relapse) from the patient's view compared to the urologist's view.

MATERIAL AND METHODS: In May 2003 we queried 1063 urologists and 801 patients following radical prostatectomy without adjuvant therapy. They were asked about preserved potency without erectile aid, existing wish for ED therapy, recommended or tested erectile aid (oral, transurethral, intracorporal, vacuum constriction device[VCD], penile implant) as well as the long-term use. Return rate: patients 80.1%, urologists 26.7%.

RESULTS: According to the urologists' view 9.1% of their affected patients were potent postoperatively without a device, but according to the polled patients only 4.7%. The wish to be treated for erectile dysfunction existed in the urologists' opinion in 46.1% of their patients, while they considered that 44.8% had no wish for treatment. On the other hand, 59.3% of the patients would like to be treated and only 28.5% did not want any kind of treatment. Regarding the long-term use of therapy for ED, the urologists thought that 26.1% of their patients did not receive therapy for the problem, and 69.7% of the patients stated they received no long-term therapy. Only 30.3% of the patients confirmed long-term therapy, while the urologists thought that 73.9% of the patients...
used an erectile aid. Definite therapy in the urologists' opinion involved: oral medication in 38.4%, MUSE in 3.6%, (SKAT) in 37.3%, VCD in 20.4%, and a prosthesis in 0.3%. Indeed 19.8% of the patients used oral medication, 1.7% MUSE, 26.7% SKAT, 50.9% VCD, and 0.9% penile implant. Considering the satisfaction of patients, urologists thought that 46.2% of the patients were satisfied with their treatment of ED, but only 28.9% of the patients were actually satisfied themselves. CONCLUSIONS: The comparison of patients' and urologists' views shows a clearly different description of the ED situation after RPX. The proportion of patients with a wish for treatment and the proportion of dissatisfied patients are much higher from the patients' view. This demonstrates an undertreatment of ED patients after RPX, which should also be taken into account under the current changes in the German health care system.