

Abstract citation ID: qdag118.133**(149) PENILE PROSTHESIS IMPLANTATION LEADS TO SUBSTANTIAL LONG-TERM SATISFACTION IMPROVEMENT IN LOW-SCORING PATIENTS AND PARTNERS: IMPLICATIONS FOR COUNSELLING (PHOENIX REGISTRY)**

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Introduction: Penile prosthesis implantation (PPI) is an established treatment for therapy-resistant erectile dysfunction (ED). The modified Erectile Dysfunction Inventory of Treatment Satisfaction (EDITS) questionnaire assesses treatment satisfaction among both patients and their partners. Early postoperative follow-up may show only modest improvement in some cases, highlighting the need for long-term data to better characterize the trajectory of treatment outcomes.

Objective: To assess the change in EDITS scores between 12 weeks and 1-year post-PPI in the PHOENIX registry cohort, with particular focus on patients and partners presenting with low (≤ 50) initial scores.

Methods: A paired analysis was performed on individuals who completed EDITS questionnaire at both 12 weeks and 1-year post-PPI. In total, EDITS data from 913 patients and 290 partners were available, with respectively 619 and 175 providing complete data at both time points. A subgroup analysis was performed on 62 patients and 19 partners with EDITS ≤ 50 at 12 weeks.

Results: In the overall cohort, mean patient EDITS scores increased significantly from 80.3 at 12 weeks to 84.1 at 1 year. Normality of difference scores was confirmed in the patient group ($p = 0.083$) and the partner subgroup ($p = 0.726$). Among individuals with an EDITS score ≤ 50 at 12 weeks, both patients and partners demonstrated marked and highly significant improvements after one year. Patients ($n = 62$) improved from a mean of 33.5 by 34.8 points (95% CI:

27.0–42.5; $t = 8.98$, $p < 0.001$ 1×10^{-12}), while partners ($n = 19$) mean score of 30.3 improved by 48.2 points (95% CI: 38.4–57.9; $t = 10.35$, $p < 0.001$).

Conclusions: While the overall PPI cohort reported high early satisfaction, this analysis reveals that both patients and partners starting with the lowest EDITS achieve a substantial improvement by one year. These findings provide strong support for preoperative counselling, reassuring couples that major improvement continues over the long term. Nevertheless, final scores in the EDITS \leq 50 group remained below those of the overall cohort at 12 weeks, suggesting that further follow-up is warranted to explore whether continued normalization occurs over time.

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