Bölüm
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EREKTİL İŞLEV BOZUKLUĞUNUN CERRAHİ ve CERRAHİ DIŞI TEDAVİSİ

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GİRİŞ

Erektil disfonksiyon(ED), penil sertleşmenin tatmin edici bir ilişkiyi sağlayacak veya sürdürecek kadar yeterli olmaması durumu olarak tanımlanmaktadır.

Son yıllarda bilimin gelişimine paralel olarak erektil disfonksiyonun etyolojisi, ereksiyon mekanizmaları daha iyi anlaşılmış olup tanı yöntemlerinin çeşitliliği artmıştır.

ED, kişinin fizyolojik ve psikolojik yaşantısını etkileyerek yaşam kalitesini düşürebilir.

Tüm dünyada ED tedavisinde ilk tedavi seçeneği olarak fosfodiesteraz tip 5 inhibitörleri kabul edilmiştir. Kullanılan diğer tedaviler arasında intrakavernozal ajan enjeksiyonu(papaverin gibi), cerrahi yöntemler(penil protez implantasyonu, penil vasküler cerrahiler. v.b.) bulunmaktadır. Gelişmekte olan tedaviler arasında ise kök hücre çalışmaları ve gen terapileri bulunmaktadır.

1.EPİDEMİYOLOJİ

Çalışmalar dünyada ED'nin yüksek prevalans ve insidansa sahip olduğunu göstermektedir.(1) Toplum tabanlı Massachusetts Erkek Yaşlanma Çalışmasında(MMAS); 40-70 yaş arası erkeklerde ED %52 oranında bulunmuştur. Hafif ED %17,2 sinde, orta ED %25,2 sinde, şiddetli ED %9,6 sında saptanmıştır. Köln'de yaşayan 30-80 yaş arasındaki erkeklerde yapılan bir diğer çalışmada ED prevalansı %19,2 olup, yaşla birlikte bu oranın %2.3'ten %53.4'e yükseldiği bildirilmiştir. MMAS çalışmasında genel ED insidansı %26, bir Hollanda çalışmasında %19,2 olarak belirtilmiştir. Yeni başlayan ED için yapılan bir kesitsel çalışmada tıbbi yardım için başvuran erkeklerin 4 tanesinden 1'i 40 yaşının atında idi ve %25 lik bu dilimin %50 sinde şiddetli ED mevcut idi. Çalışmalardaki farklılıkların metodolojik ve hasta popülasyonundaki farklılıklardan kaynaklandığı düşünülmektedir.[2-4]

ED risk faktörleri arasında; metabolik sendrom diyabetes mellitus, sigara, egzersiz yapmama, obstrüktif uyku apne sendromu, hepatit B ilişkili karaciğer yetmezliği, D vitamini eksikliği bulunmaktadır. Bazı çalışmalarda, kardiyovasküler risk faktörleri için yaşam tarzı değişikliği ve farmakoterapinin ED'li erkeklerde cinsel fonksiyonu iyileştirmede yardımcı olabileceğine dair bazı kanıtlar gösterilmiştir. Ancak, ED'nin önlenmesinde yaşam tarzı değişikliklerinin etkilerini belirlemek için daha çok kontrollü prospektif çalışmalara gerek olduğu unutulmamalıdır.[5-10]

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Tablo 4: Günümüzde kullanılan protezler	
2 parçalı şişirilebilir	**3 parçalı şişirilebilir**
Ambicor™ [AMS]	Titan OTR ™ (One Touch Release) [Coloplast]
Semirijid olanlar	Titan OTR NB ™ (Narrow base) [Coloplast]
Spectra ™ [AMS]	Titan Zero Degree ™
Genesis ™ [Mentor]	AMS 700 CX ™ [Boston Scientific]
Tube ™ [Promedon]	AMS 700 LGX ™ [Boston Scientific]
ZSI 100 ™ [Zephyr]	AMS 700 CXR ™ [Boston Scientific]
Virilis II ™ [Subrini]	ZSI 475 ™ [Zephyr]

Penis Protezi Komplikasyonları

Penis protezi implantasyonunun iki ana komplikasyonu mekanik başarısızlık ve enfeksiyondur. En sık kullanılan 3 parçalı protezin (AMS 700CX / CXRTM ve Coloplast Titan Zero degreeTM) birkaç teknik modifikasyonu, beş yıllık takipten sonra %5'in altında mekanik arıza ile sonuçlanmıştır.[75] Gram pozitif ve Gram negatif bakterilere karşı uygun antibiyotik profilaksisi ile dikkatli cerrahi teknikler düşük riskli hastalarda, yüksek hacimli merkezlerde enfeksiyon oranlarını %2-3'e kadar düşürmüştür. Antibiyotik emdirilmiş bir protez (AMS Inhibizone ™) veya hidrofilik kaplı protez (Coloplast Titan™) implante edilerek enfeksiyon oranı %1-2'ye kadar azaltılabilir. Yapılan çalışmalarda, penil protez enfeksiyonu riskinin, iyileşen cihazlar ve cerrahi deneyimin artmasıyla her geçen gün azaldığı bildirilmiştir.[77-80]

Revizyon ameliyatı geçiren hastalar, immun sistemi normal olmayan hastalar(immünosüpresyon, diyabetes mellitus, omurilik yaralanması) ve penil fibrozu olan hastalar penil protez için yüksek risk taşıyan gruplardır. Enfeksiyon durumunda protezin çıkarılması ve antibiyotik verilmesi gerekir. Alternatif olarak, enfekte olmuş protezin derhal yeni bir protezle değiştirilmesini içeren bir yıkama protokolünde %80'in üzerinde başarı bildirilmiştir.[78, 81-83]

Anahtar Kelimeler: Erektil disfonksiyon; Medikal tedavi; Cerrahi tedavi

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