



PRESS RELEASE

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Nerve sparing helps most prostate cancer patients to have same orgasms as before surgery

The vast majority of men who have a prostate cancer operation can retain their ability to orgasm if the surgery is carried out without removing the nerves that surround the prostate gland like a hammock, according to a study in the February issue of the urology journal **BJUI**.

American researchers from Cornell University, New York, studied 408 patients who received robot-assisted laparoscopic radical prostatectomy (RALP) from a single surgeon between January 2005 and June 2007. They focused on men who were able to achieve orgasm before surgery and the average follow-up was three years.

“Ninety-one per cent of men retained the same orgasmic function after surgery if the nerves on both sides were cancer free and we were able to spare them” says lead author Dr Ashutosh Tewari, Director of the Prostate Cancer Institute and the LeFrak Robotic Surgery Center at Weill Cornell Medical College. “This figure went down to 82% in men who had nerve sparing on one side and 61% in men who had little or no nerve sparing. If the patients had no nerve sparing, nerve reconstruction was attempted by joining the ends of the resected nerves.

“Orgasm has a major influence on patients’ satisfaction with the overall sexual experience and alterations in orgasm are associated with significant reduction in emotional and physical satisfaction. They may also lead to men avoiding sex, experiencing relationship problems and even the total breakdown of those relationships.

“It is acknowledged that open, rather than laparoscopic, radical prostatectomy damages some pelvic nerves and one notable study found that only 22% of men who received this surgery retained their orgasmic function. However there is little data on orgasmic function following RALP and that is what this study sought to address.”

The 408 patients who took part in the study were able to have sexual intercourse – scoring 60 or more on the International Index of Erectile Function – and achieve orgasm before surgery. Just over half (54%) were under 60 years and the remainder were 60 plus. The median age was 60.

Key findings of the research include:

- The majority of the patients (74%) had bilateral nerve sparing (nerves spared on both sides), 13.5% had unilateral nerve sparing (nerves spared on one side only) and 12.5% had little or no nerve sparing.
- 88% of the men under 60 were able to achieve orgasm after surgery. The majority (80%) had the same orgasm, 6% had diminished orgasm, 2% said their orgasm was better and 0.5% had an earlier orgasm than before surgery. The remaining 12% were unable to orgasm.
- Orgasm rates were much higher in men under 60 who had had bilateral nerve sparing (93%) than unilateral nerve sparing (83%) and no nerve sparing (65%).
- 83% of the men aged 60 plus were able to achieve orgasm after surgery. The majority (80%) had the same orgasm, 2% had diminished orgasm, 0.5% said their orgasm was better and 0.5% had an earlier orgasm than before surgery. The remaining 17% were unable to orgasm.
- 85% of the men under 60 and 77% of the men aged 60 plus were able to have sexual intercourse after surgery and this rose to 90.5% and 82% respectively in those who had bilateral nerve sparing.
- 156 patients who achieved post-operative orgasm also completed a questionnaire - 82% said their satisfaction rates were high or very high, 10% said they were moderate and 7% said they were low. Just over 3% reported pain when they had an orgasm.

“As far as we are aware this is the largest analysis of orgasmic function in the robotic prostatectomy literature and will provide valuable information for surgeons talking to patients about what sort of sexual function they can expect after surgery” says Dr Tewari.

“Our study shows that men under the age of 60 and those who underwent bilateral nerve sparing surgery were more likely to recover the same orgasmic function they enjoyed before surgery than older men and those with no nerve sparing.”

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Notes to editors

- Nerve sparing can preserve orgasmic function in most men after robotic-assisted laparoscopic radical prostatectomy. Tewari et al. **BJUI**.109, pp596–602. (February 2012) doi:10.1111/j.1464-410X.2011.10402x
- Established in 1929, **BJUI** is edited by Professor John Fitzpatrick from Mater Misericordiae University Hospital and University College Dublin, Ireland. It provides its international readership with invaluable practical information on all aspects of urology, including original and investigative articles and illustrated surgery. <http://wileyonlinelibrary.com/journal/BJU>
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