

Early Assessment of Sildenafil and tadalafil in treatment of lower urinary tract symptoms associated with benign prostatic hyperplasia

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Objective: To compare the efficacy of sildenafil citrate only and Tadalafil only once daily for management of benign prostate hyperplasia (BPH) with lower urinary tract symptoms (LUTS)

Materials and Methods: A total of 18 men with BPH related LUTS were randomized to receive sildenafil citrate 50 mg and tadalafil 5 mg for 4 weeks. International Prostate Symptom Score (IPSS), maximum urinary flow rate (Q_{max}), post-void residual urine volume (PVR) and International Index of Erectile Function-5 (IIEF-5) were assessed before and after medication. Statistical analysis was used for intra- and inter-group comparison.

Results: Mean age of patients was 65.22 ± 7.29 years. The use of sildenafil and tadalafil alone was associated with a significant improvement of International Prostate Symptom Score (IPSS) (-3.2; $p < 0.0001$) and (-8.3; $p < 0.0001$), Quality of life (QoL) (+0.6; $p:0.022$) and (+1.3; $p: 0.002$), the International Index of Erectile Function (IIEF) score only on tadalafil (-4.2; $p: 0.004$). No statistically significant effect of maximum urinary flow rate (Q_{max}), post voiding residual urine volume (PVR) in treatment with sildenafil and tadalafil groups. Tadalafil statistically superior than sildenafil for improvement of IPSS ($p:0.002$)

Conclusion: Once daily sildenafil or tadalafil alone demonstrated clinically meaningful and statistically significant efficacy and it was well tolerated in men with benign prostatic hyperplasia with lower urinary tract symptoms. Treatment with the tadalafil was superior to sildenafil to enhance voiding symptoms.

Keywords: Benign prostate hyperplasia, Lower urinary tract symptoms, Erectile dysfunction, Sildenafil citrate, Tadalafil, LUTS, IPSS, IIEF

Penilaian awal dari Sildenafil dan tadalafil dalam pengobatan benign prostat hiperplasia dengan lower urinary tract symptoms

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Objektif: Membandingkan efikasi dari terapi tunggal sildenafil sitrat dan tadalafil sekali sehari dalam pengobatan benign prostat hiperplasia dengan lower urinary tract symptoms.

Material and Metode: Sebanyak 18 laki-laki dengan BPH yang disertai gejala LUTS secara randomisasi menerima terapi tunggal sildenafil sitrate 50 mg dan tadalafil 5 mg selama 4 minggu. International Prostate Symptom Score (IPSS), maximum urinary flow rate (Qmax), post-void residual urine volume (PVR) dan International Index of Erectile Function-5 (IIEF-5) dievaluasi sebelum dan setelah pengobatan. Analisa statistik perbandingan dihitung pada intra- dan antar-grup.

Hasil: Rerata usia pasien 65.22 ± 7.29 tahun. Penggunaan terapi tunggal sildenafil dan tadalafil berhubungan dengan peningkatan yang signifikan dari International Prostate Symptom Score (IPSS) (-3.2; $p < 0.0001$) dan (-8.3; $p < 0.0001$), Quality of life (Qol) (+0.6; $p:0.022$) dan (+1.3; $p: 0.002$), the International Index of Erectile Function (IIEF) hanya meningkat pada tadalafil (-4.2; $p: 0.004$). Tidak ada perubahan yang signifikan pada maximum urinary flow rate (Qmax), post voiding residual urine volume (PVR) dalam pengobatan dengan sildenafil maupun tadalafil. Tadalafil secara statistik lebih baik dibandingkan sildenafil dalam meningkatkan IPSS ($p:0.002$)

Kesimpulan: Terapi tunggal sildenafil atau tadalafil sekali sehari menunjukkan perubahan yang berarti secara klinis. Secara statistik memberikan efikasi yang signifikan dan dapat digunakan pada laki-laki yang menderita benign prostat hiperplasia dengan lower urinary tract symptoms. Pengobatan dengan tadalafil lebih baik dibandingkan dengan sildenafil dalam memperbaiki keluhan miksi.

Keywords: Benign prostat hiperplasia, Lower urinary tract symptoms, Disfungsi ereksi, Sildenafil citrate, Tadalafil, LUTS, IPSS, IIEF