Clinical case presentation endovascular therapy of erectile dysfunction

Prof. Dr. med. Nicolas Diehm, M.B.A.
Founder and Medical Director
Vascular Institute Central Switzerland and Interdisciplinary ED Institute Switzerland
Aarenaustrasse 2b, CH - 5000 Aarau
Fon +41 62 824 02 42, Fax +41 62 824 02 27
Email nicolas.diehm@angiologie-aargau.ch
www.angiologie-aargau.ch
www.erekitionsstoerungen-behandlung.com
Disclosure

Speaker name: Nicolas Diehm

I have the following potential conflicts of interest to report:

- [ ] Consulting
- [ ] Employment in industry
- [ ] Stockholder of a healthcare company
- [ ] Owner of a healthcare company
- [ ] Other(s)

- [ ] I do not have any potential conflict of interest
Clinical Case I
Patient history

• 51-year old former soccer professional, physically in very good shape.
• Previous CVRF: positive family history of CVD.
• IIEF-15 @ baseline: 29/75 points; PDE-5-I non-responder.
• ED workup: impaired penile perfusion after 10 ug Caverject, newly diagnosed hyperlipidemia.
• CT angiography: significant calcification right pudendal artery. No coronary artery calcification.
Clinical Case I
Angiogram / Stenting

Right distal pudendal artery
Pre Stent

Right distal pudendal artery
Post Stent
Clinical Case I
Acute MI with occlusion of LAD 1.5 years later
Clinical vignette:
Gluteal claudication and arterial ED

Veit Schuetz: New York Penis

A. glutea inferior

A. pudenda
Clinical Case II

• 17-year old patient with erectile dysfunction non-responsive to PDE-5-inhibitors. Sportive. 3-10 cigarettes per day since 6 months, regular cannabis consumption.

• Vascular ED workup: impaired arterial perfusion subsequent to intracavernous Caverject application. No evidence of venous leak.

• CTA: high-grade obstruction of the left internal pudendal artery proximal.
Clinical Case II

Before and after DEB PTA (nitro i.a.)

Normalization of erectile dysfunction postinterventionally (no need for PDE-5-I).
Conclusions

• Do not underestimate the cardiovascular risk of seemingly healthy ED patients!
• Always ask for concomittant gluteal claudication.
• Arterial ED can occur also in very young patients.

www.erektionsstoerungen-behandlung.com