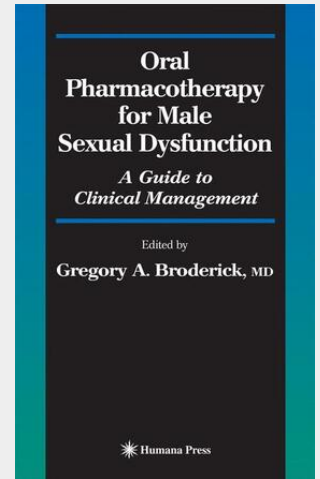


Oral Pharmacotherapy for Male Sexual Dysfunction

A Guide to Clinical Management

For the generation that reached sexual maturity in the 1960s, the "pill" became synonymous with sexual freedom and started a sexual revolution. For women it meant freedom from the fear of pregnancy, and for men enhanced sexual opportunity. The new era of the pill has nothing to do with fertility, but everything to do with sex. The first orally effective prescription drug for treating erectile dysfunction (ED) was marketed in 1998. Sildenafil (Viagra) has rejuvenated the aging male veterans of the sexual revolution, forever changed the science of sexual medicine, and transformed society's perspective on aging and sex. This class of drugs, known as oral phosphodiesterase inhibitors (PDE-type 5), is highly effective in the treatment of ED. Since its introduction there has been a much greater awareness of ED, its comorbidities, and its effects on the quality of life. In 1997, while preparing to address the Endocrine Society on the occasion of the 92nd American Urological Association meeting, I first looked at the pre-clinical studies of sildenafil. I thought "this will change everything" and it clearly has—changing practice patterns in sexual medicine, and the attitudes of patients, potential patients, and their partners. Two new PDE-type 5 inhibitors, tadalafil (Cialis) and vardenafil (Levitra), were first approved by the European Committee for Proprietary Medicinal Products and subsequently by the Food and Drug Administration in 2003 and 2004.

With the advent of such oral drugs as Viagra®, Cialis®, and Levitra® for the treatment of erectile dysfunction (ED), the burden of first patient evaluation has fallen on the primary care provider. In *Oral Pharmacotherapy for Male Sexual Dysfunction: A Guide to Clinical Management*, highly experienced urologists and physician researchers review each aspect of male sexual dysfunction (interest, performance, and orgasm) and their implications for treatment. The authors address a wide variety of clinical issues, ranging from common medical risk factors for ED to the evaluation and management of men who have atypical presentations that require focused testing; from diabetic ED to the safety assessment of PDE inhibitors for cardiac patients; and from combination drug therapy for refractory patients to neuropharmacological therapies. Guidance is also provided for vacuum erection devices and surgical implants, the role of self-medication with dietary supplements, the management of post-prostatectomy ED, and the emerging pharmaceutical therapies for rapid ejaculation. On the pharmaceutical side, the authors summarize the pharmacology and development of PDE-type 5 inhibitors, review the preclinical data and 5 years of postmarketing data on Viagra®, examine the preclinical data on Levitra®, and discuss the design and conduct of US clinical trials of Cialis®. Authoritative and informative, *Oral Pharmacotherapy for Male Sexual Dysfunction: A Guide to Clinical Management* clarifies for urologists, family physicians, and internists each of the diagnostic approaches to male sexual dysfunction, as well as the pharmacological strategies available for its safe and effective management.



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