

Pre-Procedural Anxiety in Men Undergoing Intracavernosal Penile Training

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Introduction

- The American Urological Association (AUA) defines Erectile Dysfunction (ED) as the consistent or recurrent inability to attain and/or maintain penile erection sufficient for sexual satisfaction (Burnett et al., 2018).
- There are approximately thirty million men in the United States and one hundred fifty million men globally who suffer from ED (Burnett et al., 2018).
- The Sexual Medicine Society of North America states Vasoactive penile injections ICI therapy, introduced in 1982, has become a well-established treatment for ED with a high rate of clinical efficacy (Nelson et al., 2013).
- Often men self-report severe panic and anxiety prior to their training sessions. Anxiety relieving measures such as a proper education prior to procedural appointments, may promote patient compliance, and improved satisfaction rates with injections.

Purpose

The goal of the injections is to improve quality of life (sexual function) by preventing penile atrophy. The purpose of this quality improvement project was to develop, implement, and evaluate the effects of a video education program on the reduction of pre-procedural anxiety and increased perception of preparation in men undergoing ICI training.

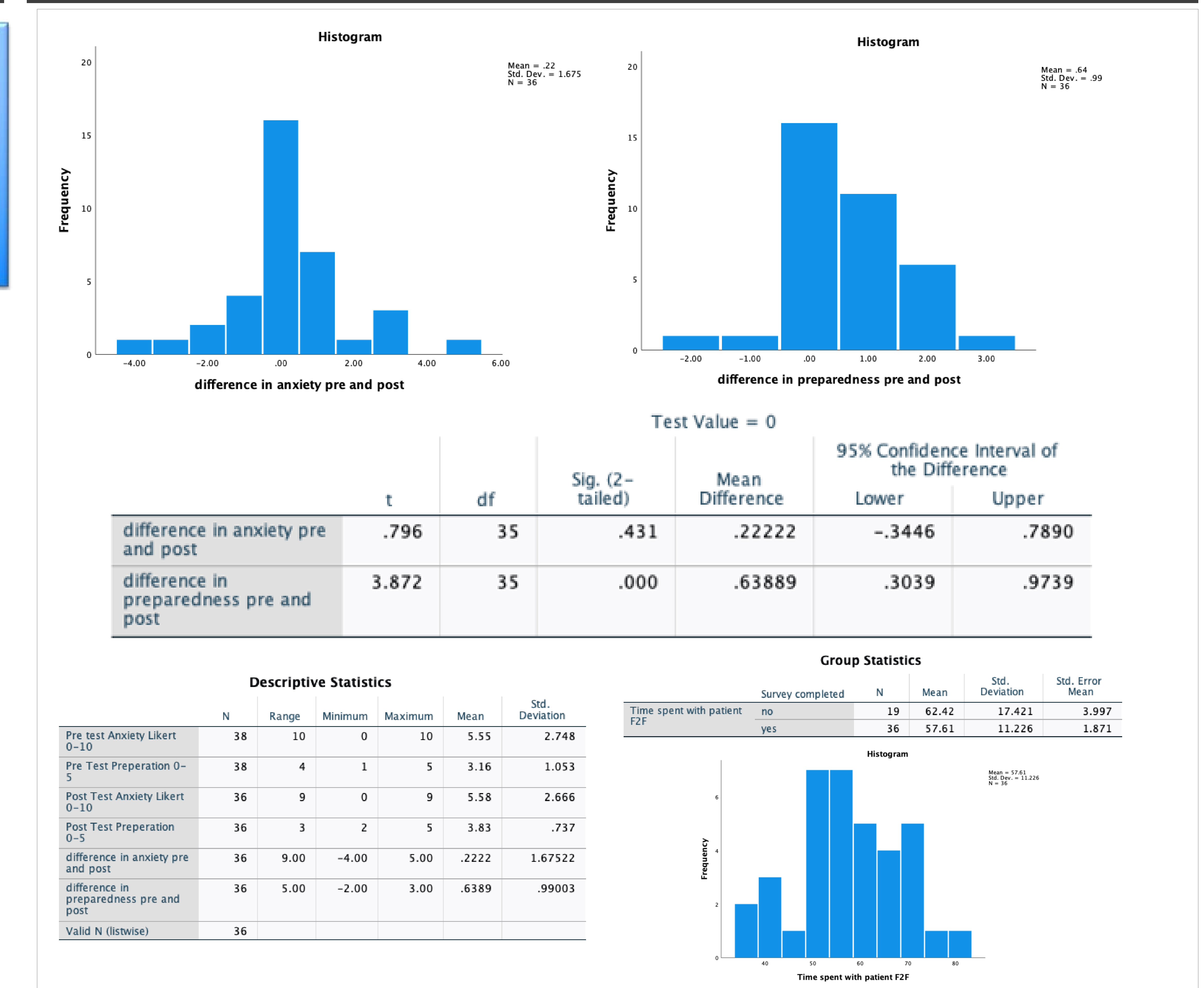
Aims

- 01** Decrease anxiety related to use and common misconceptions of penile injections.
- 02** Increase patient's perceived preparation toward the use of penile injections using a video-education platform.
- 03** Decrease procedural appointment time to 45 minutes in duration.

Methods

- Design:** Prospective Pre-test/ post- test design method
- Setting:** An ambulatory men's sexual medicine health clinic located in a large oncologic academic institution on the east coast
- Sample:** Men ≥ 18 years of age who have failed to get an erection with PDE5i and never been exposed to ICI
- Sample Size:** n=58
- Ethical Review Approval:** PERC approval through JHU and institution

Results



Conclusion

- Statistically significant improvement in patient preparedness was noted prior to injection training with the use of a formal video education platform.
- Despite lack of statistical significance related to anxiety, time spent face to face with the provider decreased after exposure to the video education.
- A practice change from 60 minute visits were reverted into two 30 minute visits which may improve patient satisfaction, increase revenue for the institution, and enhance quality of patient care.



References

- Burnett, A.L., Nehra, A., Breau, R.H., Culkin, D.J., Faraday, M., Hakim, L.S., Heidelbaugh, J., Khera, M., McVary, K.T., Miner, M.M., Nelson, C.J., Sadeghi-Nejad, H., Seftel, A.D., Shindel, A.W. (2018). Erectile Dysfunction: AUA Guideline (2018). American Urological Association J Urol 2018; **200**: 633.
- Nelson, C. J., Hsiao, W., Balk, E., Narus, J., Tal, R., Bennett, N. E., & Mulhall, J. P. (2013). Injection anxiety and pain in men using intracavernosal injection therapy after radical pelvic surgery. *The journal of sexual medicine*, 10(10), 2559–2565. <https://doi-org.proxy1.library.jhu.edu/10.1111/jsm.12271>