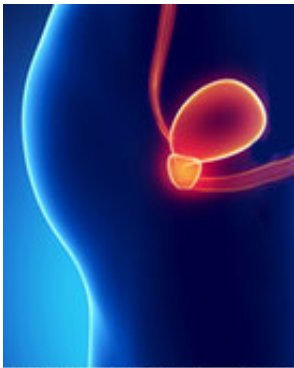


PDE-5 inhibitors tied to prostate cancer biochemical recurrence

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Artist rendering of prostate and bladder

(HealthDay)—Phosphodiesterase type 5 inhibitor use after radical prostatectomy is associated with increased risk of biochemical recurrence, according to a study published in the February issue of *The Journal of Urology*.

Uwe Michl, from University Hospital Hamburg-Eppendorf in Germany, and colleagues examined the effect of phosphodiesterase type 5 [inhibitors](#) on biochemical recurrence after [radical prostatectomy](#) for prostate cancer. Data were included for 4,752 consecutive patients with localized [prostate cancer](#) treated with bilateral nerve-sparing radical prostatectomy. Of these, 23.4 percent received phosphodiesterase type 5 inhibitors postoperatively. The risk of biochemical recurrence was

compared for those who did and did not receive phosphodiesterase type 5 inhibitors. Patients were followed for a median of 60.3 months.

The researchers found that the five-year biochemical recurrence-free survival estimates were 84.7 percent in the phosphodiesterase type 5 inhibitor group and 89.2 percent in the nonphosphodiesterase type 5 inhibitor group. Phosphodiesterase type 5 inhibitor use was an [independent risk factor](#) for biochemical recurrence (hazard ratio, 1.38) in multivariate regression analysis, and the correlation persisted after propensity score matching.

"Contrary to experimental data, the use of phosphodiesterase type 5 inhibitors after radical prostatectomy may adversely impact biochemical recurrence," the authors write.

More information: [Abstract](#)
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