PREDICTION OF ADVERSE EFFECTS IN PATIENTS WITH BENIGN PROSTATIC HYPERPLASIA TREATED WITH 5 ALPHA REDUCTASE INHIBITORS

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DEFINITION

Post 5 ARI syndrome initially known as "postfinasteride syndrome" since 2012 relates to all aderse effects of 5 alpha redustase inhibitors mainly erectile dysfunction and depression

The basis of its occurrence is the inhibition of 5 alpha reductases and blocking the biosynthesis of powerful neurosteroids from their precursor dehydroepiandrosterone and the conversion of testosterone to dihydrotestosterone.

Dehidroepiandrosterone itself has been proven as a stimulator to NO sintetase activity in the endothelium and as neuromodulator in the brain

AIM

To show the significance and role of the dehydroepiandrosterone in patients with BPH who are on 5ARI therapy as an important predictor of post-5ARI syndrome

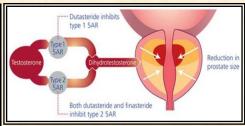


Figure 1. Effects of 5 alpha redustase inhibitors

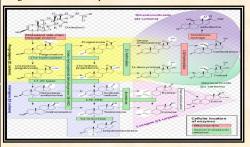


Figure 2. Biochemical role of 5 alpha redustases

MATERIAL

Investigated 112 patients with BPH combination therapy (tamsulosin + dutasteride)
Control group 110 patients with monotherapy with tamsulosin

METHODS

- IPSS
- IIEF-5 and
- Beck depression inventory

RESULTS

Post-5ARI syndrome appeared in 20 patients (19%) All 20 patients had low IIEF-5 scores, suggesting erectile dysfunction (fig.3)

All 20 patients had high Beck depression inventory score, suggesting from mild to clinical depressive symptoms (fig.4)

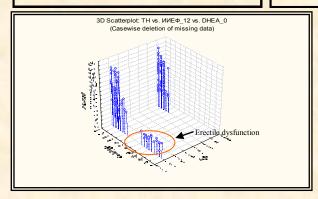


Figure 3.Erectile dysfunction in correlation with DHEA levels in examined group

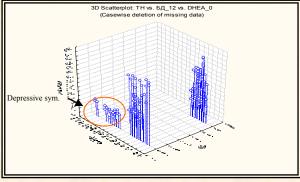


Figure 4.Depressive symptoms in correlation with DHEA levels in examined group

CONCLUSION

- Patients that have had lower levels of dehydroepiandrosterone and no erectile dysfunction nor depressive behavior before starting BPH therapy with 5ARI, SHOWED expression of these symptoms after 5ARI introduction
- Serum levels of dehydroepiandrosterone in patients with BPH who take 5ARI therapy plays an important role as predictors in the appearance of post-5ARI syndrome.