The HelpED Study: Degree of Agreement Between Patients, Partners, and Physicians on the Erection Hardness Score of Men With Erectile Dysfunction

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Objectives: To study the agreement between patients, partners, and physicians on the Erection Hardness Score (EHS) in men with erectile dysfunction (ED) consulting a general practice physician or urologist.

Design and Methods: This observational, multicentre study in Belgium enrolled men (age ≥18 y) in a stable heterosexual relationship (≥3 mo). The degree of agreement was measured by Cohen's weighted Kappa coefficient.

Results: 447 men were recruited, completed the baseline questionnaire, and gave consent (64% aged 51–70 years; 62% in a stable relation >10 years; 78% with ED problems ≤3 years). Physician baseline data were completed for 77% (345/447): 52% of these consulted to discuss ED, 80% had ≥1 ED risk factor, and a new ED treatment was proposed for 99%. Partners of 253 patients completed baseline questionnaires (52% aged 46–60 years; 54% attended the consultation). The mean ± SD baseline EHS (range 1–4) was 2.3±0.8 (self-assessed), 2.2±0.9 (partner-assessed), and 2.2±0.8 (physician-assessed); the coefficient of agreement was 0.62 (95% CI, 0.54–0.71) for patients vs partners, 0.48 (95% CI, 0.41–0.56) for patients vs physicians (0.47 [95% CI, 0.37–0.57] when limited to patients with a participating partner), and 0.32 (95% CI, 0.21–0.42) for partners vs physicians. 60% (266/447) of patients and 152 of their partners returned the 2–4 month follow-up questionnaire. As assessed by patients vs partners, the EHS was improved for 74.7% vs 75.4% (including 58% [57/98] vs 57% [27/57] of those with EHS3 who improved to EHS4), was unchanged for 22.6% vs 21.2%, and deteriorated for 2.7% vs 3.4% (P<0.0001 for change between visits); coefficient of agreement, 0.60 (95% CI, 0.45–0.75).

Conclusions: The agreement in EHS between patient, partner and physician supports the use of this simple instrument in clinical practice.

Topic: 7. ED Medical Treatment

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MEN WITH MILD ERECTILE DYSFUNCTION SHOULD BE TAKEN SERIOUSLY

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