

LET'S TALK
ABOUT ED

*Get the facts.
And get back to your life.*

This content is intended for patient counseling purposes only. This content is for informational/educational purposes and is not intended to treat or diagnose any disease or person. No claims are made as to the safety or efficacy of mentioned preparations. The compounded medications featured in this piece have been prescribed and administered by physicians who work with Wedgewood Pharmacy. You are encouraged to speak with your health care provider as to the appropriate use of any medication.



wedgewood
PHARMACY

TELL ED TO
TAKE A HIKE



You're not alone. A lot of guys know ED.

Nearly

30 million

men have erectile dysfunction (ED) in the United States.

More than

50%

of men between the ages of 40 and 70 experience it to some degree¹.

The bottom line is this - you're not alone, and you don't have to go it alone.

This guide focuses on a treatment option prescribed for erectile dysfunction, *penile self-injection medications*, also known as *intracavernosal injections*. If you have any questions after reading this guide, bring them to your doctor's attention.

Don't let ED be the boss of you.

It's natural to feel some anxiety about erectile dysfunction. But ED is a medical condition that can be treated - and treatment can result in significantly improved quality of life² for both you and your partner. Many men report that enhancing or even saving a relationship, enjoying a satisfying sex life and regaining confidence far outweigh any anxieties about pursuing treatment - *it's well worth it*.

Common treatment options for ED include oral medications, injections, vacuum-tube devices, and penile prostheses. Talk about these options with your health care provider and, together, determine the best choice for you.

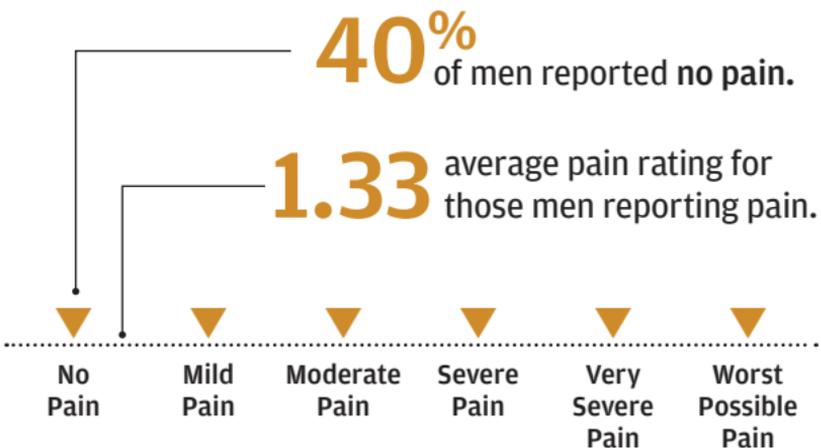
When pills don't work.

Penile self-injection medications are an option when pills are ineffective. Success rates (i.e., obtaining an erection) for these injection medications may vary; however, according to one study, patients who have undergone prostatectomies have reported success rates as high as 85 percent to 95 percent³. In a second study, it was reported that injectable therapy provides a fairly natural-feeling erection⁴, which can mean more satisfaction in your sexual relationships⁵.

Pain: What to expect.

While the idea of sticking a needle into your penis may be a bit overwhelming, many men report that it's the psychological anxiety of their first self-injection - not the pain itself - that's the problem. In fact, 40 percent of men in a recent study (Albaugh & Ferrans, 2009⁶) rated the needle insertion pain at 0 (no pain) on a verbal pain scale of 0-10. For men who reported any pain, the average pain rating was only 1.33.

Verbal Pain Intensity Scale



If you experience discomfort after the medication is injected, talk with your doctor. It may be as simple as a change in medication or a review of your injection technique.

Introduce your partner to ED.

It's important for men dealing with ED to take their partners' feelings into consideration and keep them involved in the process, even asking them to attend doctors' appointments with you. In most cases, partners feel they not only *should be* involved but *need to be* involved - to learn more about the medication, how it works, where to inject, adverse effects and other issues.

When a man has a drug-induced erection, his partner may have feelings of resentment that he achieved it without the partner's involvement and might even consider the erectile process as unnatural. This can be overcome by encouraging the partner to participate. With injectable therapy, the partner can do anything from filling the syringe to actually giving the injection.



ED Answers

(Frequently Asked Questions)

How do ED medications work?

While oral medications increase blood flow to the penis during sexual stimulation, penile injections use vasoactive medications (a pharmaceutical agent that has the effect of either increasing or decreasing blood pressure and/or heart rate) locally injected into the side of the penis to dilate the blood vessels of the penis causing penile engorgement⁷. Tri-Mix, an injectable medicine, has been shown in studies to work by relaxing the smooth muscle in the penis and opening the blood vessels causing an erection⁸.



One study has shown that penile self-injection medications cause an erection in 10 to 15 minutes that lasts up to one hour⁹; however, please note that it may take multiple visits to your health care provider to find the right dose for an erection firm enough to have sex¹⁰. Your health care provider will guide you through this process.

How, where and when do I self inject?

The James Cancer Hospital & Solove Research Institute, The Ohio State University Medical Center has published a report, “Treatment for Erectile Dysfunction (ED): Injection of Medicine” (Copyright 2006 - June 2, 2010) that offers guidelines for penile self-injection techniques. You may access this report via Wedgewood Pharmacy’s website: WedgewoodRx.com/wp/TALK-ABOUT-ED.

How often can I use the medication?

It is best to ask your doctor for guidance regarding how often you can use the medication; however, the James Cancer Hospital & Solove Research Institute recommends that you wait 24-48 hours between injections and limit use to three times a week¹¹.

What if the medication doesn't work or stops working?

There may be times when there is “no response.” If this occurs, call your doctor. It may be a matter of adjusting the dosage or ensuring that the medication was injected in the recommended area of the penis. If you feel that you need a larger dose or stronger medication, discuss this with your doctor so you can work together to get the best results.

What are the most common adverse effects?

If the needle goes through a vein during self-injection, a hematoma (swelling of the vein) can occur¹². If this happens, put pressure on the area with your hand. Bruising and bleeding may occur as well.



If the erection lasts longer than one hour, talk to your health care provider about adjusting your dosage¹³.



If you continue to have an erection after two hours, contact your physician. Some physicians may recommend taking four 30mg tablets of Sudafed (pseudoephedrine)¹⁴. If you have a heart condition, check with your physician before using Sudafed or using any other medication.



If your erection lasts for more than four hours – a serious medical condition known as *priapism* – you need to seek immediate medical attention to avoid permanent damage. The best course of action is to go to an emergency room for treatment without delay. When an erection is rigid for more than four hours, fresh blood flow and oxygen to the penis is restricted. Tissue damage can occur if this is not treated. Not seeking treatment may result in permanent, untreatable ED¹⁵.

To minimize the risks of such adverse effects, always follow your health care provider's self-injection instructions, and be sure to consult with him or her if you have any questions or concerns.

What kind of syringes should I use?

Syringes/needles come in various gauges (thinness) and lengths. The commonly used syringe/needle size is 29g

(gauge), one-half inch; however, 31g is also popular (the higher the gauge, the thinner the needle). Ask your doctor about the needle gauge and length that may work best for you.

What do I do with my used syringes?

After the syringe is used, many place it into a thick plastic (detergent bottle, milk jug) or metal (coffee can) container that has a tight cap or screw-on lid. Make sure that the container is sealed before discarding in the regular trash (not the recycling). Before throwing away the container, you should seal the lid with heavy-duty tape. For more information, contact the Coalition for Safe Community Needle Disposal at 1-800-643-1643 or visit: WedgeWoodRx.com/wp/TALK-ABOUT-ED.



TRAVEL & DISCRETION



Traveling with your medication is usually hassle free. While you travel, you can keep your medication refrigerated by adding the vial to a bag of ice or storing it in a thermos. Another option is to acquire a medication travel kit that often includes a reusable freezer pack and can accommodate vials of the medication, alcohol swabs and syringes – either empty or pre-filled. By refreezing the gel pack, this kit can also be used to place your medication and syringes in places you feel are more discreet. You can also reuse the foam-based packaging container and freezer packs that are used to ship the medication.



The Transportation Security Administration (TSA) permits taking freezer packs or frozen gel packs that are required to keep medically necessary liquids cool through the screening (though they may be subject to additional screening). Supplies that are associated with medically necessary liquids, such as syringes, are allowed through a checkpoint once they have been screened by X-ray or inspection. The passenger should declare these items to an officer and separate them from other belongings for screening.

How should the medication be stored?

It's best to keep the medication refrigerated and away from light. Stored under these conditions, the medication is good for approximately 120 days. Do not use the medication if it has particles, is cloudy or has passed its "beyond use" date.

How do I fill/refill my prescription?

When you receive your prescription, you may choose to call:

Wedgewood Pharmacy
1.800.331.8272

If you choose to have Wedgewood Pharmacy fill your prescription, our customer care specialist will ask for your shipping address, phone number, email address and payment information. We'll only use your email address to quickly send you shipping notifications, order confirmations and refill reminders. **We will never sell or rent your email address to anyone.**

Along with your medication, you will receive a supply of prescribed syringes and alcohol swabs, as well as a Penile Self-Injection brochure.

If you are a local customer, you can pick up your medication at our pharmacy, located at:
405 Heron Drive, Suite 200
Swedesboro, NJ 08085

ABOUT WEDGEWOOD PHARMACY

The Power of Compounding®

Wedgewood Pharmacy, located in Swedesboro, NJ, is one of the largest compounding pharmacies in the United States. We are also a premier source of intracavernosal injection medication prescribed by hundreds of physicians and used by thousands of patients – just like you. We believe that a close working relationship between you, your health care provider and our pharmacy is the key to success.

You should refill your medication as needed or prescribed. If you choose to refill your prescription at Wedgewood Pharmacy, you may refill your medication by:

- ▶ Calling us at **1.800.331.8272**.
- ▶ Going online at **Refill.WedgewoodPharmacy.com**. (Simply enter your prescription number that you will receive with your initial order and payment information.)

Wedgewood Pharmacy accepts Visa, MasterCard, Discover and American Express. You can also send a check or money order to Wedgewood Pharmacy, 405 Heron Drive, Suite 200, Swedesboro, NJ 08085.

Where can I learn more?

Our team of pharmacists and customer care specialists are available to answer any questions that you may have. Just call **1.800.331.8272**.

To learn more about erectile dysfunction, intracavernosal injections and other related topics, go to our website at WedgewoodRx.com/wp/TALK-ABOUT-ED.

You can also find support and resources at the following sites:

- ▶ dailystrength.org
- ▶ ehealthforum.com/health/erectile_dysfunction.html
- ▶ mdjunction.com/erectile-dysfunction
- ▶ drugs.com/answers
- ▶ edforum.org



For more than 30 years, Wedgewood Pharmacy has been a trusted source of high-quality compounded medications. Wedgewood Pharmacy is also PCAB® (Pharmacy Compounding Accreditation Board) accredited, which means that we have been recognized as meeting nationally accepted quality assurance, quality control and quality improvement standards.

1.800.331.8272

WedgewoodRx.com

DO'S & DON'TS

DO

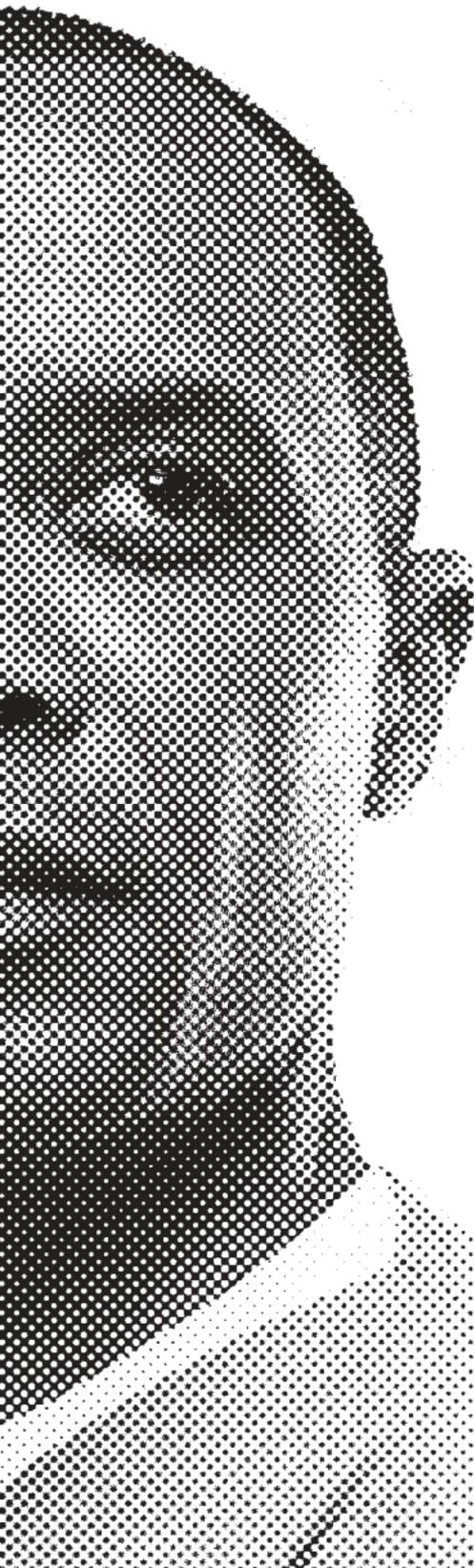
stop the injection if you experience severe pain. There may be a problem with the injection site. You may feel a mild burning during injection. That is normal.

DO

inject in a different spot each time, alternating sides to prevent scarring.

DO

get medical attention right away if your erection lasts longer than four hours.



PENILE REHABILITATION

You know what they say: Use it, or lose it.

Research shows that this advice often applies to ED, especially when it's an adverse effect of prostate removal, prostate radiation or hormone ablation¹⁶. It's often 18-24 months after a radical prostatectomy before full erectile function recovery occurs. This can lead to atrophy and penile fibrosis (or scarring), which can, in turn, cause further erectile dysfunction.

Therefore, reestablishing blood flow to the penis is important to preserve and promote optimal erectile function in these men¹⁷.

In other words, the erection tissue is a muscle. Going long periods of time without erections is unhealthy for the tissue and may damage it¹⁸. Having erections after cancer treatments keeps erectile tissue healthy, which may lead to a better long-term erection function¹⁹. And that's where intracavernosal injection treatment has been shown by researchers to play a role. As previously noted, men that have had prostatectomies have reported success rates as high as 85 percent to 95 percent²⁰.

DO NOT

take oral PDE5 inhibitor medications (e.g., Viagra, Cialis, Levitra) the night before or morning of injection without consulting your physician.

DO NOT

give injections on the top or bottom of the penis to avoid nerves, arteries and the urethra (the tube your urine passes through). Only inject the medication on the side (10 o'clock or 2 o'clock) and from about the midpoint to the base of the outstretched penis. If you inject in the wrong area of your penis, call your doctor. Do not try to inject your medication again.

DO NOT

change the prescribed dose of the medication without first consulting with your health care provider.

REFERENCES:

- ¹ WebMD.com, Erectile Dysfunction Health Center, July 20, 2009.
- ² Gheorghiu S., Godschalk M., Gentili A., Mulligan, T., Quality of life in patients using self-administered intracavernous injections of prostaglandin E1 for erectile dysfunction, *The Journal of Urology*, July 1996, 156(1):80(1).
- ³ Claro Jde, A., de Aboim, J.E., Maringolo, M., Andrade, E., Aguiar, W., Nogueira, M., ... Srougi, M. (2001). Intracavernous injection in the treatment of erectile dysfunction after radical prostatectomy: An observational study. *Sao Paulo Medical Journal*, 119(4), 135-137.
- ⁴ Albaugh, Jeffrey A., Addressing and Managing Erectile Dysfunction after Prostatectomy for Prostate Cancer, 2010 Society of Urologic Nurses and Associates, *Urologic Nursing*, May-June 2010, Volume 30 Number 3.
- ⁵ Ibid.
- ⁶ Albaugh J, Ferrans CE. (2009). Patient-reported pain with initial intracavernosal injection. *Journal of Sexual Medicine*, 6(2), 513-519.
- ⁷ Albaugh, Jeffrey A., Addressing and Managing Erectile Dysfunction after Prostatectomy for Prostate Cancer, 2010 Society of Urologic Nurses and Associates, *Urologic Nursing*, May-June 2010, Volume 30 Number 3.
- ⁸ Memorial Sloan-Kettering Cancer Center, Penile Injection Therapy, 2011.
- ⁹ Treatment for Erectile Dysfunction (ED): Injection of Medicine, James Cancer Hospital & Solove Research Institute, The Ohio State University Medical Center, 2010.
- ¹⁰ Memorial Sloan-Kettering Cancer Center, Take Home Instructions for Penile Injection Therapy, Patient Information Fact Card, 2007; revised 2009, 2010.
- ¹¹ Treatment for Erectile Dysfunction (ED): Injection of Medicine, James Cancer Hospital & Solove Research Institute, The Ohio State University Medical Center, 2010.
- ¹² Ibid.
- ¹³ Ibid.
- ¹⁴ Memorial Sloan-Kettering Cancer Center, Penile Injection Therapy, 2011.
- ¹⁵ Memorial Sloan-Kettering Cancer Center, Take Home Instructions for Penile Injection Therapy, Patient Information Fact Card, 2007; revised 2009, 2010.
- ¹⁶ Sex & Intimacy After Prostate Cancer, Jeffrey Albaugh PhD, APRN, CUCNS, Jesse Brown VA Medical Center, NorthShore University Healthcare Urology Sexual Health Program.
- ¹⁷ Ibid.
- ¹⁸ Memorial Sloan-Kettering Cancer Center, Penile Injection Therapy, 2011.
- ¹⁹ Ibid.
- ²⁰ Claro Jde, A., de Aboim, J.E., Maringolo, M., Andrade, E., Aguiar, W., Nogueira, M., ... Srougi, M. (2001). Intracavernous injection in the treatment of erectile dysfunction after radical prostatectomy: An observational study. *Sao Paulo Medical Journal*, 119(4), 135-137.



wedgewood
P H A R M A C Y

WedgewoodRx.com

1.800.331.8272