

Angioplasty and stenting to treat peripheral arterial disease causing refractory erectile dysfunction

Information for the public
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What has NICE said?

There is not enough evidence to be sure about how well this procedure works or how safe it is. For this reason, it should only be done as part of a research study.

What does this mean for me?

Your health professional can only offer you this procedure as part of a research study. Details of your procedure will be collected.

The condition

There are many causes of erectile dysfunction (the inability to get and maintain an erection). One cause is a build-up of fatty deposits in an artery in the pelvis. This narrows or blocks the artery, which reduces the flow of blood to the penis.

NICE has looked at using angioplasty and stenting of the affected artery as a treatment option.

[NHS Choices](#) may be a good place to find out more.

The procedure

The procedure is usually done using local anaesthetic. A thin, flexible tube called a catheter is inserted into an artery in the groin, and guided into the affected artery. A balloon is then inflated at the site of the narrowing to widen it. Sometimes a wire mesh tube called a stent is inserted and stays in place to hold the artery open.

Benefits and risks

When NICE looked at the evidence, it decided that there was not enough evidence to be sure about how well this procedure works or how safe it is. The 2 studies that NICE looked at involved a total of 50 patients.

The studies showed that the procedure successfully widened the affected artery, with some patients reporting a reduction in the symptoms of erectile dysfunction in the following 6 months. There was evidence that the narrowing came back in some people. It is not known how well this procedure works in the longer term.

There was a problem during the procedure for 1 patient, when angioplasty caused reduction in the flow of blood through the artery. This was successfully corrected by the end of the procedure. In some patients the stent was incorrectly placed in the wrong artery, but this did not cause any problems.

If you want to know more about the studies, see the [guidance](#). Ask your health professional to explain anything you don't understand.

Questions to ask your health professional

- What does the procedure involve?
- What are the benefits I might get?
- How good are my chances of getting those benefits? Could having the procedure make me feel worse?
- Are there alternative procedures?
- What are the risks of the procedure?
- Are the risks minor or serious? How likely are they to happen?
- What care will I need after the procedure?
- What happens if something goes wrong?
- What may happen if I don't have the procedure?

About this information

NICE [interventional procedures guidance](#) advises the NHS on the safety of a procedure and how well it works.

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Accreditation

