


**EDITORIAL COMMENT**

This study provides additional evidence of the durability of the Rezum procedure. The fact that this can be performed on an outpatient basis, in an ambulatory surgery center or office surgery setting, comports with other procedures that have evolved over the past decade (laser, transurethral microwave thermotherapy, transurethral needle ablation, etc.).

The main advantages of Rezum are not only it is continued durability for many patients out to 4 years as demonstrated in this study, but also the limited impact on sexual and ejaculatory function. This new data along with previous reports examining water vapor thermal therapy suggests it can be offered to wide variety of patients.

Patient informed consent is critical to both outcomes and compliance with any selected mode of BPH/lower urinary tract symptoms treatment. The advantages of modern therapy for BPH/LUTS are the options open to most patients. Information on drug costs and other alternative procedures must be included and documented, along with their advantages and disadvantages, with particular focus not only on urinary function, but sexual function as well. Some studies from European centers have suggested that out of pocket costs at 5 years with continuous medical therapy will exceed that of early surgery.

Rezum therapy for BPH has been shown to achieve cost equivalence in the United States within a few years as the authors have noted and referenced. Traditional clinical factors related to patient age, gland size, compliance, comorbidity and surgeon skill set also factor into recommendations for treatment of individual patients.

When compared to other alternative minimally invasive procedures such as Urolift, Rezum was shown to be less costly and to have fewer side effects.

German studies indicate that Rezum results in quick resolution of LUTS while maintaining sexual function, both erectile function as well. Some studies from European centers have suggested that out of pocket costs at 5 years with continuous medical therapy will exceed that of early surgery.
and ejaculatory. The technique is applicable to varying gland sizes and morphologies, including intravesical lobes and bladder neck obstruction. This report also reasserts Rezūm as an option to multi drug therapy, again confirming the need for clear patient understanding of all options with their respective benefits and harms.5

Patients who are sexually active and considering pharmacotherapy need a full disclosure of risks of sexual side effects. It is to be remembered that alpha-blockers have effects on erectile function and libido that are similar to placebo yet have more effect on ejaculation. 5-alpha-reductase inhibitors increase the risk of erectile, libido, and ejaculatory dysfunction compared to placebo. Combination therapy triples the incidence for ejaculatory dysfunction. Dosage reductions, using alternative drug options or opting for procedural intervention should all be strongly considered if sexual side effects occur. Men being evaluated for BPH symptoms must have careful consideration given to comorbidities such as diabetes and hypertension to make sure that these are adequately treated while therapy is being initiated. Continuing cost considerations for long term medical therapy must also be made light of the current insurance climate with rising copays and deductibles for many patients.6

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REFERENCES

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AUTHOR REPLY
The authors appreciate the positive comments concerning this technology and our report of the 4-year Rezūm water vapor thermal therapy data. We agree with his assessments noting that targeted thermal ablation of tissue can be applied to all obstructing areas of the prostate, symptomatic and quality of life improvements are durable from the earliest time frames throughout 4 years and sexual function remains intact. Most importantly the surgical retreatment rate is very low. In addition, we feel that the 4-year study reported herein validates the effectiveness of the technique, but more importantly compares favorably with all other minimally invasive surgical treatments by providing significant clinical improvements that deliver an impactful and durable response for patient and urologist.

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