

Results: Total cholesterol was significantly decreased after 6 months by TRT compared to before TRT (183.7 ± 33.9 , 175.5 ± 33.1 , $P=0.001$). Triglycerides was also significantly decreased after 6 months (147.2 ± 84.1 , 131.2 ± 62.7 , $P=0.009$). TC and TGs were decreased after 12 months. However, there were no changes in LDL-C at 6 months (114.2 ± 27.7 , 110.2 ± 30.1 , $P=0.44$) and 12 months (114.2 ± 27.7 , 110.8 ± 25.7 , $P=0.159$) after TRT. The change was not found in HDL-C at 6 and 12 months (50.2 ± 13.7 , 50.1 ± 14.6 , 49.5 ± 13.9). There was no increase in PSA with treatment at 6 months, however the increase was found at 12 months (0.85 ± 0.58 , 1.17 ± 1.2 , $P=0.002$).

Conclusions: TRT has the efficacy to reduce total cholesterol and triglycerides. But LDL-C and HDL-C were not changed at 6 and 12 months after TRT.

Keywords: Testosterone replacement therapy (TRT); lipid profile; testosterone deficiency syndrome

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AB174. Erectile dysfunction and usage of PDE5-inhibitors in male partner of infertile couple

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Introduction: Infertility is a major source of life stress and could be associated with male sexual dysfunction. We investigated sexual function in male partner of infertile couples during timed intercourse (TI) and the usage of PDE5-inhibitor for ED treatment

Materials and methods: Male partners of couples with more than 1 year of infertility period seeking medical care or an evaluation of couple infertility were enrolled. In conjunction

with infertility evaluation, the participants completed the International Index of Erectile Function (IIEF)-5 questionnaire for evaluation of sexual function. The patients were also asked about the usage of phosphodiesterase type 5 inhibitor (PDE5-I) such as sildenafil or tadalafil for erectile dysfunction (ED) treatment. Patients with azoospermia, hypogonadism, underlying chronic medical disease, previous exposure to gonadotoxin were excluded.

Results: A total of 236 male partners were finally included. All patients had a comprehensive interview, physical examination, semen analysis, and/or hormonal profile study. The mean age of the patients was 38.5 years (range, 34-43 years) and mean infertile period was 18 ± 7.1 months. The incidence of mild to moderate ED (IIEF-5 score, ≤ 16) in men of infertile couple was 8.9% (21/236) and the incidence of mild ED (IIEF-5 score, 17-21) was 42% (99/236). However, only 5.8% (12/236) have used PDE5-I for ED treatment during fertile period.

Conclusions: Sexual dysfunction is common in male partners of infertile couple. Medical personnel dealing with infertile couple should consider active counselling and treatment for male partner's sexual dysfunction.

Keywords: Erectile dysfunction (ED); usage of phosphodiesterase type 5 inhibitor (PDE5-I); infertile couple

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AB175. Three-piece penile prosthesis implantation under local anesthesia

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Introduction: Malleable penile prosthesis could be inserted by local anesthesia only, but there are few reports available regarding 3-piece penile prosthesis implantation under local anesthesia due to some difficulty in inserting reservoir. It would be very advantageous if 3-piece penile prosthesis could be implanted by local anesthesia only at