



Curriculum Vitae

Anthony Beardsworth



Dr Anthony Beardsworth recently became the senior medical director for Men's Health after 7 years in global drug development on the Urology platform at Eli Lilly. He obtained his medical degree at the Westminster Medical School, London in 1987. He trained in OBGYN becoming a Member of the Royal College of Obstetricians and Gynaecologists in 1996. In 1999 he completed his research thesis in post reproductive medicine and joined Eli Lilly in 2000. In 2003 he launched tadalafil for ED in the UK; in 2006 he led the registration and launch of tadalafil for ED in Japan; in 2008 he led the development, registration and launch of tadalafil for PAH in the US, Europe and Japan; and most recently he led the development and submission of tadalafil for BPH in the US and Europe.



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The Association of Erectile Dysfunction with BPH-LUTS: New Understanding and Therapeutic Approaches

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Abstract

ED is highly prevalent in LUTS patients visiting an office-based urologist and is accompanied by a profound impact on the quality of life. Apparently, even during an urological consultation many ED-patients are hesitant to actively ask for treatment. Sexual issues could become key considerations for physicians managing patients with LUTS.

Phosphodiesterase type-5 (PDE5) inhibitors (tadalafil, vardenafil, and sildenafil) are well known treatment options for men with erectile dysfunction and should be taken before anticipated sexual activity. Tadalafil is also approved for once daily use in men with erectile dysfunction. Though the efficacy of PDE5i on BPH-LUTS has been discussed in several studies, only once daily use of tadalafil, in addition to ED treatment, is approved for BPH-LUTS treatment. Since the prevalence of coexisting ED and BPH-LUTS is high, especially in older men, the possibility of a single medical therapy approved to treat both conditions could be of clinical interest.

In this talk, topics related to tadalafil once daily on ED, BPH and ED and BPH coexist will be covered, including its efficacy, safety, advantages for patients, and clinical practices. Finally, the role of this new treatment option in algorithm on the management of LUTS will be discussed.