

**Do Current Pelvic Outcome Scores Identify Patient-Reported Symptoms?
Long-Term Patient-Reported Genitourinary and Sexual Dysfunction in Males
After Operatively Treated Pelvic Ring Injuries**

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Purpose: This study was conducted to assess sexual and urological dysfunction in a male cohort of operatively stabilized pelvic ring injuries using validated patient-reported outcomes at a mean of 15 years (range, 11-22) postinjury. We further assessed whether these were identified in standard outcome scores (EQ-5D-3L [EuroQol- 5 Dimensions, 3 Levels]), utilized for this population.

Methods: Between 1994 and 2005 our institution stabilized 177 male patients with unstable pelvic injuries. Surviving, traceable patients were contacted. Participants were asked to complete outcome measures. EQ-5D- 3L) is a standardized instrument used as a measure of general health outcome. MLUTS [Modular Questionnaire for Male Lower Urinary Tract Symptoms] is validated for assessing 2 aspects: Symptoms - Frequency, Voiding, Incontinence Scale 0 (Best) to 52 (Worst) and Bothersomeness Scale 0 (Best) to 130 (Worst). Sexual Health Inventory for men (SHIM) has a score of 1-25, with 1 being the worst indicating severe erectile dysfunction.

Results: A total of 52 males, mean age 59 years (range, 30.2-82.95) participated in the study with mean time from injury 15 years (range, 11 to 22 years), 10 with recorded neurological injury. EQ-5D-3L was completed by all participants with a mean score of 71. MLUTS mean symptom score was 9 (range, 0-26) and bothersome score was 21(range, 0-90). The SHIM had a mean score of 14; 17 patients (37%) reported severe sexual dysfunction and only 9 (19.6%) reported no problems. There was no detectible correlation between urological and sexual dysfunction. Urological dysfunction did not correlate with EQ-5D-3L.

Conclusion: To accurately gain a true understanding of the global functional outcome of patients following a pelvic injury, urological and sexual dysfunction must not be overlooked. Only 19% of the patients had documented neurological dysfunction. 80% report some level of sexual dysfunction with 37% reporting it as severe. Long-standing sexual and /or urological dysfunction can be a source of significant psychological impact that is not identifiable on EQ-5D-3L and other outcome scores used in assessment of pelvic ring injury. Future studies need to recognize and quantify sexual and urological function, and its importance with patient-reported outcome.