Review Form 1.7

Journal Name:	**Journal of Advances in Medicine and Medical Research**
Manuscript Number:	**Ms_JAMMR_107021**
Title of the Manuscript:	**Low-Intensity Extracorporeal Shockwave Therapy versus Oral Therapy in the Management of Mild and Moderate Erectile Dysfunction: A Prospective Randomized Study**
Type of the Article	**Original Research Article**

Review Form 1.7

PART 1: Review Comments

	Reviewer's comment	**Author's comment** *(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)*
Compulsory REVISION comments **1. Is the manuscript important for scientific community?** (Please write few sentences on this manuscript) **2. Is the title of the article suitable?** (If not please suggest an alternative title) **3. Is the abstract of the article comprehensive?** **4. Are subsections and structure of the manuscript appropriate?** **5. Do you think the manuscript is scientifically correct?** **6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.** **(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)**	**1. Yes** **2. Yes** **3. Yes** **4. Yes** **5. Yes** **6. Yes**	
Minor REVISION comments **1. Is language/English quality of the article suitable for scholarly communications?**	The text is adequate and easy to understand	
Optional/General comments	Background: One emerging approach to treating Erectile Dysfunction (ED) involves the use of noninvasive low-intensity extracorporeal shockwave therapy (LI-ESWT). This method holds promise for improving erectile function while demonstrating satisfactory levels of safety and effectiveness. The aim of this study was to evaluate the safety and efficacy of LI-ESWT compared to treatment with phosphodiesterase type 5 inhibitors (PDE5i) in males with mild to moderate ED. Methods and Patients: This prospective randomized controlled trial (RCT) enrolled sixty male individuals with mild to moderate ED (index of erectile function - IIEF-5 scores between twelve and sixteen). All participants were married with stable heterosexual relationships lasting more than six months and were confirmed to have vasculogenic ED as determined by Doppler ultrasound. Patients were randomly allocated into two equal groups using block randomization: Group A received LI-ESWT, while Group B received sildenafil 100 mg on demand. Results: Both groups exhibited significant improvements in Erectile Hardness Score (EHS), IIEF-5, self-esteem, and relationship (SEAR) scores at the first and third months of treatment compared to baseline. There were no significant differences observed between Group A and Group B in terms of IIEF-5 and EHS at follow-up compared to baseline. Conclusions: The study's findings suggest that LI-ESWT is comparable in efficacy to sildenafil, as assessed by IIEF-5 and SEAR questionnaires. The observed enhancements in EHS and IIEF-5 scores indicate that both interventions effectively enhance erectile function. Keywords: Erectile Dysfunction (ED), Low-Intensity Extracorporeal Shockwave Therapy, Oral Therapy Introduction:	

	Erectile dysfunction (ED), also known as erectile disorder, is a condition characterized by the inability to achieve and maintain an erection sufficient for engaging in sexual intercourse or related activities. It is important to note that the term "ED" is now more commonly used than "impotence." The diagnosis of erectile dysfunction, as per the Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5), requires the presence of symptoms for a minimum of six months [1]. ED can be categorized into two primary etiological categories: organic and psychogenic. Organic causes can be attributed to hormonal, vasculogenic, and neurogenic factors. Among these etiologies, vasculogenic factors, including inflow or arterial abnormalities, are the most prevalent [3]. The utilization of phosphodiesterase type 5 inhibitors (PDE5i) is currently widespread and represents the most effective therapeutic approach for individuals with ED. However, some patients may exhibit a lack of response to these medications due to various factors. In such cases, alternative treatment options are often considered, including penile prosthesis implantation and intracorporeal injections [4]. In the United States, the Food and Drug Administration (FDA) has approved several oral PDE5i for the treatment of ED, including avanafil, sildenafil, tadalafil, and vardenafil. Additionally, other PDE5i have received regulatory approval for use in different regions [5]. Extracorporeal shock wave therapy (ESWT) has been investigated across various medical domains with varying degrees of success. High-intensity shock wave therapy is employed in lithotripsy due to its focused mechanical disruptive characteristics, while medium-intensity shock waves have demonstrated anti-inflammatory properties and are used in the treatment of various orthopedic conditions, such as bursitis, non-union fractures, and tendonitis [6]. In contrast, low-intensity extracorporeal shock wave therapy (LI-ESWT) is an emerging treatment method with angiogenetic properties. Consequently, it is employed in the management and treatment of peripheral neuropathy, persistent wounds, ED, and heart neovascularization [6]. The primary objective of this research was to test the hypothesis that LI-ESWT's induction of neovascularization would lead to improved cavernosal artery blood flow, thereby enhancing erectile function. This, in turn, could establish LI-ESWT as a viable and noninvasive therapeutic option for ED [6]. The specific aim of this study was to evaluate the safety and efficacy of LI-ESWT in comparison to PDE5i for men with mild to moderate ED. Conclusions: The findings of this research reveal that low-intensity extracorporeal shock wave therapy (LI-ESWT) demonstrated comparable efficacy to sildenafil in terms of treatment outcomes, as assessed by key measures such as the International Index of Erectile Function-5 (IIEF-5) and the Sexual Health Inventory for Men (SHE) questionnaire. These results suggest that both interventions were effective in enhancing erectile function. Notably, improvements in both the Erection Hardness Score (EHS) and IIEF-5 measures were observed. These improvements underscore the fact that both LI-ESWT and sildenafil were successful in significantly enhancing erectile function among the study participants. This finding is of particular significance, as it highlights LI-ESWT as a promising noninvasive alternative to the well-established pharmaceutical approach offered by sildenafil. These results not only contribute to our understanding of LI-ESWT's potential as a treatment option for erectile dysfunction but also emphasize the importance of considering non-pharmacological approaches when managing this condition. Further research and long-term studies are warranted to confirm these findings and establish LI-ESWT as a reliable and effective therapy for individuals with	

	erectile dysfunction.	

PART 2:

	Reviewer's comment	**Author's comment** *(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feed-back here)*
Are there ethical issues in this manuscript?	*(If yes, Kindly please write down the ethical issues here in details)*	

Reviewer Details:

Name:	**Ricardo Alexandre Fernandes Ferro**
Department, University & Country	**Universidade Federal de Minas Gerais, Brazil**