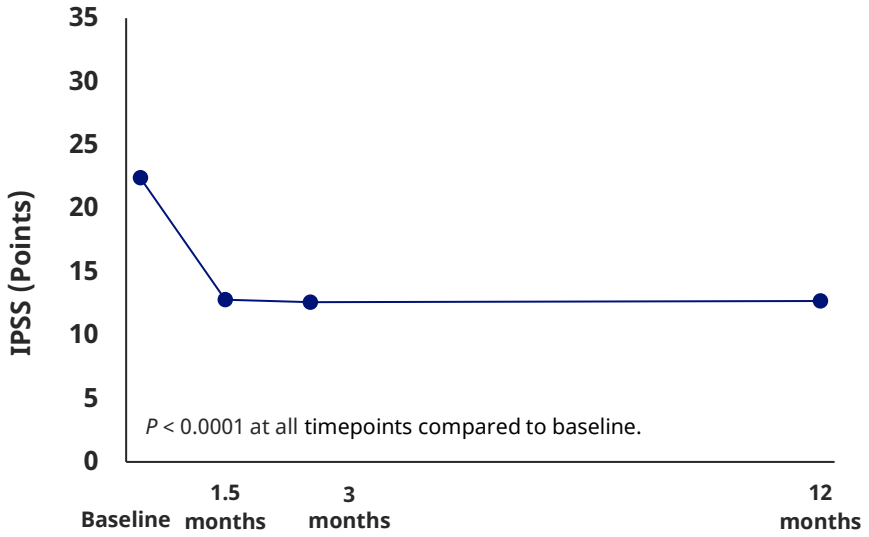
The iTind Temporarily Implanted Nitinol Device for the Treatment of Lower Urinary Tract Symptoms Secondary to Benign Prostatic Hyperplasia: A Multicenter, Randomized, Controlled Trial

Chughtai B, Elterman D, Shore N et al. Urology. 2021;153:270-276.

At 12 months, the iTind procedure group showed significant improvements ($P < 0.0001$, per-protocol analysis) across key parameters: IPSS decreased by 9.25 points, Qmax increased by 3.52 mL/s, and Quality of Life (QoL) improved by a 1.9-point reduction from baseline.



Abbreviations: IPSS (International Prostate Symptom Score); QoL (Quality of Life); Qmax (Maximum urinary flow rate).

Objective

To compare treatment results with the iTind procedure vs. sham treatment in lower urinary tract symptoms (LUTS) due to benign prostatic hyperplasia (BPH).

Results

- A total of 175 men (mean age 61.1 ± 6.5 years) participated in the study (118 iTind procedure vs 57 sham).
- At 3 months, 78.6% of the iTind procedure patients had a ≥3-point reduction in the International Prostate Symptom Score (IPSS), vs. 60% in the sham group ($P = 0.029$). After 3 months, the sham group was unblinded, and the study primarily focused on the iTind procedure group for long-term outcomes.
- Ninety seven percent of the iTind procedure patients that responded to treatment at 3 months maintained their response at 12 months.
- Mild adverse events (AEs) occurred in 38.1% of the iTind procedure patients and 17.5% of sham patients. No de novo ejaculatory or erectile dysfunction reported.

Conclusion

The iTind procedure provides significant, rapid, and durable improvement in LUTS due to BPH and preserves sexual function over a follow-up period of 12 months.

Product: The iTind Procedure.

Link to Publication

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