

# BENIGN PROSTATIC HYPERPLASIA TREATMENTS

Generic	Brand	Strength	Form	Dose	Note
<b>5 ALPHA-REDUCTASE INHIBITORS<sup>1</sup></b>					
dutasteride	<b>Avodart</b>	0.5mg	caps	0.5mg once daily	<ul style="list-style-type: none"> <li>• Inhibits type I (liver, skin) and II (genitourinary) 5 alpha-reductase</li> <li>• &gt;90% suppression of baseline serum DHT</li> </ul>
finasteride	<b>Proscar</b>	5mg	tabs	5mg once daily	<ul style="list-style-type: none"> <li>• Inhibits type II (genitourinary) 5 alpha-reductase</li> <li>• 70% suppression of baseline serum DHT</li> </ul>
<b>ALPHA<sub>1</sub>-BLOCKERS<sup>2,3</sup></b>					
alfuzosin	<b>Uroxatral</b>	10mg	ext-rel tabs	10mg daily	<ul style="list-style-type: none"> <li>• Swallow whole</li> <li>• Take after same meal each day</li> <li>• Dose titration not needed</li> </ul>
doxazosin	<b>Cardura</b>	1mg, 2mg, 4mg, 8mg	scored tabs	Initially 1mg daily; may double dose every 1–2wks; max 8mg daily	
	<b>Cardura XL</b>	4mg, 8mg	ext-rel tabs	Initially 4mg daily; may titrate after 3–4wks; max 8mg daily	<ul style="list-style-type: none"> <li>• Swallow whole</li> <li>• Take with breakfast</li> </ul>
silodosin	<b>Rapaflo</b>	4mg, 8mg	caps	8mg once daily	<ul style="list-style-type: none"> <li>• Take with a meal</li> <li>• Renal impairment (CrCl 30–50mL/min): 4mg</li> </ul>
tamsulosin	<b>Flomax</b>	0.4mg	caps	Initially 0.4mg daily; may increase to 0.8mg daily after 2–4wks	<ul style="list-style-type: none"> <li>• Swallow whole</li> <li>• Take ½hr after same meal each day</li> </ul>
terazosin	—	1mg, 2mg, 5mg, 10mg	caps	Initially 1mg daily; max 20mg daily	<ul style="list-style-type: none"> <li>• Give at bedtime</li> </ul>
<b>PHOSPHODIESTERASE TYPE 5 INHIBITOR</b>					
tadalafil	<b>Cialis</b>	2.5mg, 5mg, 10mg*, 20mg*	tabs	5mg taken at approximately the same time every day	<ul style="list-style-type: none"> <li>• Also indicated for erectile dysfunction + BPH: take without regard to timing of sexual activity.</li> <li>• Moderate renal dysfunction (CrCl 30–50mL/min): Initially 2.5mg, may increase to 5mg.</li> <li>• Severe renal dysfunction (CrCl &lt;30mL/min): not recommended.</li> <li>• Mild or moderate hepatic impairment: use caution; severe: not recommended.</li> <li>• Concomitant alpha blockers: not recommended.</li> <li>• Concomitant potent CYP3A4 inhibitors: max 2.5mg</li> </ul>
<b>TYPE I and II 5 ALPHA-REDUCTASE INHIBITOR<sup>1</sup> + ALPHA<sub>1</sub>-BLOCKER<sup>2,3</sup></b>					
dutasteride + tamsulosin	<b>Jalyn</b>	0.5mg + 0.4mg	caps	1 cap once daily	<ul style="list-style-type: none"> <li>• Swallow whole</li> <li>• Take ½hr after same meal each day</li> </ul>

## NOTES

\*These strengths are not indicated for use in BPH.

<sup>1</sup>5AR inhibitors lower prostate specific antigen (PSA) levels in a predictable fashion, adjust interpretation of PSA levels accordingly.

<sup>2</sup>α<sub>1</sub>-blockers may cause orthostatic hypotension; titrate dose slowly. When therapy has been interrupted for several days or longer, patients should be retitrated from the initial dose.

<sup>3</sup>Although rare, priapism and subsequent permanent impotence has been associated with the use of α<sub>1</sub>-blockers and patients should be fully informed of this risk.

Not an inclusive list of medications. Please see drug monograph at [www.eMPR.com](http://www.eMPR.com) and/or contact company for full drug labeling.