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FOOTBALL LEGEND JOE THEISMANN LAUNCHES CAMPAIGN TO BOOST AWARENESS AND TREATMENT OF ENLARGED PROSTATE (EP)

Landmark survey finds only 10 percent of undiagnosed men are very familiar with the signs and symptoms of enlarged prostate

January 11, 2005 (New York, NY) -- Whether leading his team on the gridiron at Notre Dame and with the Washington Redskins or offering pro football commentary on ESPN, Joe Theismann's play calling has always commanded respect. Now, legendary "number 7" is lending his voice as national spokesperson for "EP in America," a campaign to educate men about enlarged prostate (EP), a condition which affects more than 50 percent of American men over 50 years of age.

"Before being diagnosed, I simply accepted going to the bathroom frequently as coming with the territory for hitting 50. After speaking with my doctor, I learned that I have an enlarged prostate and that over time, ignoring it could make my symptoms worsen and may eventually lead to surgery," said Theismann.

The former All-Pro quarterback wasn't alone in his confusion about his disease. A landmark survey found that only 10% of undiagnosed men are very familiar with the signs and symptoms of an enlarged prostate. The survey also revealed that among men with an enlarged prostate who have had surgery for their condition, most were not told they could have reduced their risk of surgery with medication. The survey of more than 1,000 men is the most comprehensive look at public, patient and professional attitudes toward EP – medically known as benign prostatic hyperplasia or BPH. Its findings were released today in conjunction with the launch of the "EP in America" campaign, sponsored by GlaxoSmithKline.

“I’m tackling this problem head on. My doctor prescribed a medication that shrinks my prostate and helps my symptoms. I’m a tremendously active person, and whether I’m driving my car or in the broadcast booth, I don’t want to live my life around the bathroom – and men should know they don’t have to either,” said Theismann.

Symptoms of an enlarged prostate vary, but the most common include frequent and urgent urination; a weak or interrupted urine stream; and getting up to urinate more often at night. Data show that enlarged prostate urinary symptoms can affect a man’s lifestyle and general well-being. The survey found that nearly half (46%) of men in their 50s with enlarged prostate who have moderate to severe urinary symptoms feel that the condition has reduced their quality of life.

“For enlarged prostate to be accurately diagnosed and effectively managed, men need to take control of their health and communicate with their doctors,” said Steven A. Kaplan, MD, Given Foundation Professor of Urology and Vice Chairman of Urology at Columbia University Medical Center. “This survey uncovers the need for improved understanding and increased communication about the condition. If men can have a better dialogue with their doctors, they will decrease their risk for health complications down the road, including the need for prostate surgery.”

Additional survey findings include:

Lack of understanding about disease: Most men, even those who have been diagnosed with the condition, do not understand the risks associated with enlarged prostate.

- The majority of men with enlarged prostate (55%) think the condition gets worse as you get older regardless of treatment.
- Only 6% of men with enlarged prostate cite acute urinary retention (AUR) – the sudden inability to urinate – as a principal risk of having an enlarged prostate.
- More than half of men surveyed (56%) believe that having enlarged prostate increases their risk for prostate cancer, when in fact, enlarged prostate has not been found to increase the risk of prostate cancer.

Better patient/physician communication is needed: There is a significant gap between what doctors say they are telling patients and what patients recall being told, especially regarding treatment options.

- The vast majority of doctors surveyed said they normally tell patients with enlarged prostate that surgery may be needed, but only about one-third of patients recall having this discussion.
- Most doctors surveyed reported that they told their patients with enlarged prostate that medication can reduce the risk of surgery but only a quarter of patients surveyed recall discussing treatment options with their doctor.
- Most men don’t realize that having an enlarged prostate does not have to result in long-term complications such as prostate surgery.

Enlarged prostate may be treated with medications like AVODART® (dutasteride) which can reduce the size of an enlarged prostate, improve urinary symptoms and reduce the risk of prostate surgery and AUR down the road.

For more information on “EP in America” with Joe Theismann, enlarged prostate and the survey, go to www.prostatecare.com.

About EP

Enlarged prostate is a prevalent and progressive condition that affects more than 50 percent of men over 50 years of age and 90 percent of men by age 80. An enlarged prostate causes changes in urinary habits because of its location around the urethra. Over time, the prostate can continue to grow and urinary symptoms may worsen as the bladder loses the ability to empty itself. Left untreated, in severe cases, an enlarged prostate can lead to serious long-term problems including AUR and the need for surgery, and in rare cases even kidney or bladder damage.

About the survey

The survey was conducted in July – September 2003 by Schulman, Ronca & Bucuvalas, Inc. (SRBI), a national public opinion research organization, and funded by GlaxoSmithKline, a research-based pharmaceutical company. Interviews were conducted via national random digit dialing among a national sample of more than 1,000 men in the U.S. Comparison interviews were also conducted with 120 spouses of men who had been diagnosed with EP and 200 physicians, including 100 primary care doctors and 100 urologists, were interviewed as well. The margin of error for the survey is $\pm 3.0\%$. Additional details about the landmark survey protocol and findings are available at www.prostatecare.com.

About AVODART

AVODART, the first and only dual 5ARI for the treatment of BPH, inhibits both the type I and type II isoenzymes responsible for the conversion of testosterone into dihydrotestosterone (DHT). DHT is the primary male hormone responsible for the enlargement of the prostate. AVODART provides the power to suppress DHT by 93 percent, reduces prostate volume, improves symptoms, and arrests the BPH disease process.

AVODART is indicated for the treatment of symptomatic BPH in men with an enlarged prostate to improve urinary symptoms, reduce the risk of AUR, and reduce the risk of BPH-related surgery. While some men have fewer problems and symptoms after three months of treatment with AVODART, a treatment period of at least six months is usually necessary to see if AVODART will improve symptoms.

Only a doctor can tell if symptoms are from an enlarged prostate and not a more serious condition such as prostate cancer. Women and children should not take AVODART. Women who are, or could become pregnant should not handle AVODART due to the potential risk to a developing male fetus. Men treated with AVODART should not donate blood until at least six months after their final dose. Caution should be used in patients with liver disease. Possible side effects include sexual side effects and breast tenderness and/or swelling. These side effects occur infrequently. For full prescribing information, see www.avodart.com.

About GSK

GlaxoSmithKline – one of the world’s leading research-based pharmaceutical and healthcare companies – is committed to improving the quality of human life by enabling people to do more, feel better and live longer.

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