



Men's Sexual Health

The media portrays sex as endlessly exciting, gratifying and straightforward. However, for many people and couples the reality is quite different. Sexual problems are very common, but because sex often involves complex emotions, patients (and doctors) can find these problems difficult to raise and discuss. The focus of this section is erectile dysfunction (ED), a common sexual problem in men with diabetes...

Definition of ED

ED is defined as the persistent inability to get or maintain an erection that is satisfactory for sexual activity. Most men will experience erectile problems during their life, but if the problem lasts for 3 months or longer, it is clinically defined as ED.

Although ED affects most men at some point in their lives, it is much more common in men with diabetes. In fact, in up to 12% of men with diabetes, ED is the first sign that leads to the diagnosis of diabetes. Fifty percent of men will experience ED within 10 years of diagnosis of diabetes. Older men with a longer duration of diabetes, poor blood glucose control, and who smoke, have high blood pressure, high cholesterol and heart disease, are at highest risk.

Diabetes causes damage to the walls of the blood vessels, which affects circulation and blood flow to the penis. In addition, nerve damage can affect erection quality. ED can also be a side effect of drugs that are often prescribed to men with diabetes (these include some blood pressure-lowering drugs and anti-depressants).

Diagnosing ED — the first step in getting help

The first step is telling your doctor that you are having sexual problems. He or she will ask you specific questions about the quality of your erections and sexual intercourse. Your doctor may also do a physical exam, check your blood pressure, your heart function and order other tests for your eyes, kidneys, blood glucose control, cholesterol and testosterone levels. The Canadian Diabetes Association's 2008 Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada recommend that all adult men with diabetes be regularly screened for ED with a sexual function history. If your doctor doesn't bring up the topic, you should.

Treating ED

There are a number of effective treatments for ED. It is important for sexual partners to be involved in any discussion about treatment choices.

Drugs called PDE5 inhibitors (available in Canada under the trade names Viagra, Cialis and Levitra) help a man achieve and maintain an erection. With sexual stimulation, these drugs increase blood flow to the penis, allowing an erection to occur naturally. They can be used safely in most men with diabetes, including select elderly men. However, they are not safe for men with certain heart conditions or men who take nitrates (which are often used to treat angina).

For men who can't take PDE5 inhibitors or find that they don't work, other options include other drugs, injections, hormone replacements, mechanical devices such as vacuum constriction devices, implants and surgery.

It also makes sense (for many health reasons other than ED) to keep your blood glucose, blood pressure and cholesterol in the target range, to quit smoking and start exercising. These will all lead to better overall health and, in turn, better sexual health.

For more information

While there is a huge amount of information about erection problems on the internet, much of it is unreliable and posted by companies selling drugs, supplements or devices that are not medically tested and which make claims that are not supported by research. Such companies rely on the fact that many men are uncomfortable discussing sexual problems and will therefore be tempted to buy products they can try in privacy.

ED is a real medical problem that needs to be treated by a real medical team. Do not attempt to self-diagnose or self-treat based on what you read on the internet. If you have questions about ED or any aspect of healthy sexual functioning, talk to your doctor or a member of your diabetes healthcare team.



Adapted with permission from the Canadian Diabetes Association