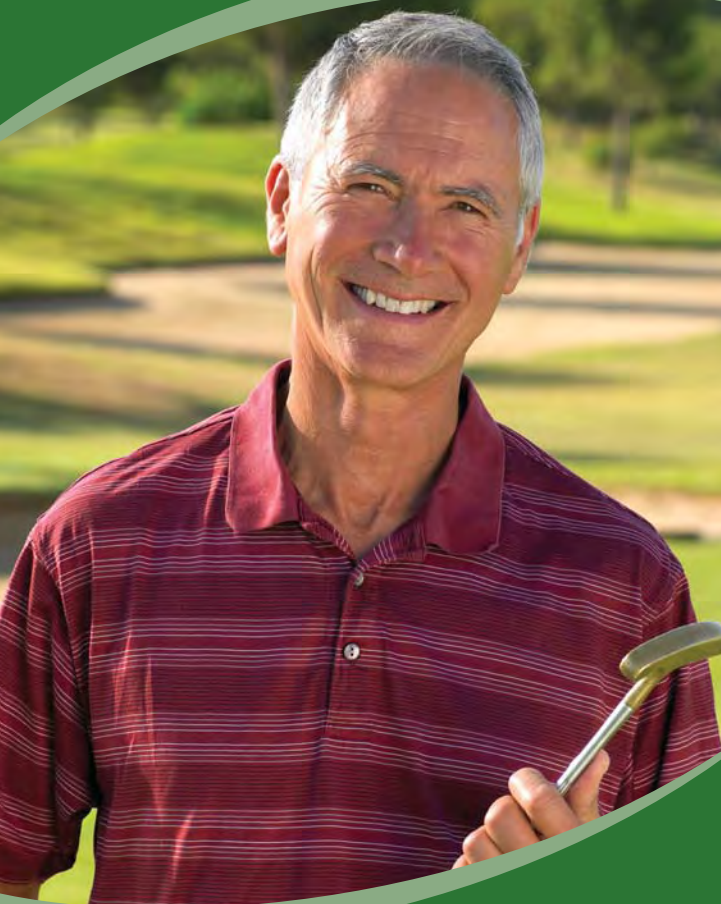




Erectile Dysfunction





Until treatment became widely available in the 1990s, erectile dysfunction (ED) was called impotence and few men faced up to the problem. That's changed. We now know that ED is a medical problem, not a personal failure. We also know that men should discuss ED with their doctors, not hide it because of embarrassment. Above all, we know that ED is treatable.

Every man experiences erectile failure from time to time. Doctors diagnose ED when a man is unable to maintain an erection satisfactory for intercourse on at least 25% of attempts.

For more information about erectile dysfunction from Harvard Health Publications, go to www.patientedu.org.

What Causes ED?

Doctors used to think psychological problems were the main cause of ED. In fact, less than 15% of cases have an emotional basis. Men who get normal erections during sleep but not during sex should suspect that mental factors are responsible. Many men blame ED on aging, but it's not the culprit. Instead, it's the illnesses that develop in older men. Medications can also cause ED. Here are the major causes.

Major Causes of ED

Vascular diseases, including atherosclerosis ("hardening of the arteries") and high blood pressure

Metabolic disorders, including diabetes and obesity

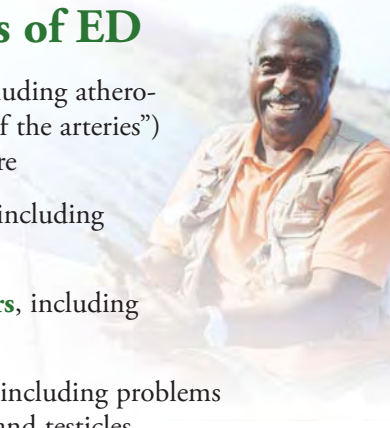
Neurological disorders, including spinal cord problems

Endocrine disorders, including problems of the pituitary gland and testicles

Prostate problems, especially treatment of prostate cancer

Medications, including drugs for blood pressure, cholesterol, depression, anxiety, and ulcers

Lifestyle problems including smoking, alcohol abuse, lack of exercise, and substance abuse



Evaluation

One of the most important things doctors can do is to evaluate their patients' cardiovascular health. That's because ED and heart disease share so many risk factors, including high blood pressure, high cholesterol, diabetes, smoking, obesity, and lack of exercise. Many men who consult a doctor for ED develop heart disease unless risk factors are diagnosed and treated.

After evaluating a man's general health, doctors should focus on the prostate. Blood tests for testosterone and other hormones are often performed, but are usually not informative. And although urologists have additional tests, they rarely help with diagnosis. That's because in most cases, a trial of treatment comes next.

Treatment: *The Cause*

If a doctor diagnoses the cause of ED, the first step is to treat that cause, often by stopping or changing a medication. Even if no correctable

problem is found, all men should begin to work on reducing risk factors. It's important, but should not delay a trial of treatment...

Treatment: *The ED Pills*

The three ED pills all act by boosting a chemical that widens arteries in the penis. They do not produce erections by themselves, but if they're taken before sex, they improve the response to stimulation. They help about 70% of men, but only about 50% of diabetics and fewer prostate cancer survivors. Although they're otherwise safe, none can be used by men who take nitroglycerin or other nitrate medication or by patients who have unstable or advanced cardiovascular disease. Doctors should be cautious about prescribing ED pills for men who take alpha-blockers. All men should be alert for side effects such as headache, facial flushing, lightheadedness, nausea, and visual disturbances.

Although you'd never guess it from the ads, the three pills are very similar:

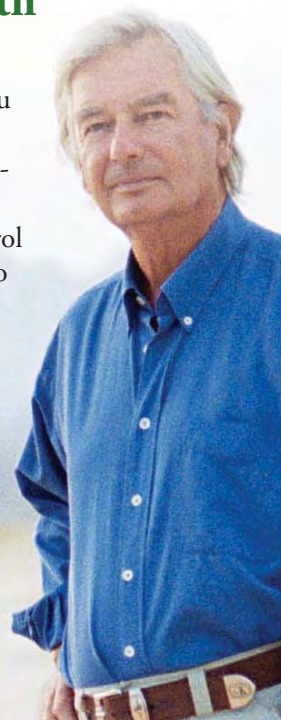
Comparing the ED Pills			
	Sildenafil	Vardenafil	Tadalafil
Tablet strengths	25, 50, or 100 mg	2.5, 5, 10, or 20 mg	5, 10, or 20 mg
Effect of food	Delayed or impaired absorption, especially with high-fat foods	None	None
Onset of action	30–60 minutes	15–30 minutes	30–45 minutes
Duration of action	4 hours (sometimes up to 12 hours)	4 hours (sometimes up to 12 hours)	36 hours
Drug interactions	Cannot take nitroglycerin for 24 hours after using.	Cannot take nitroglycerin for 24 hours after using.	Cannot take nitroglycerin for 48 hours after using.



ED and Your Health

ED is a medical problem. Your doctor should check to see if you have diabetes, vascular disease, hormonal abnormalities, psychological issues, or a less common cause. You should work to control risk factors. You may be asked to change medications that can cause ED. And in many cases, the next step is not more tests but a treatment trial, first with an ED pill.

Up to 25 million American men have ED. After many years of distress and disappointment, good treatments are finally available.



Treatment: *Other Methods*

Although the ED pills are very successful, not every man can take them, and not all men respond well. If you're in that group, don't be tempted by unregulated supplements. Instead, ask about medical treatments that work. While most family doctors prescribe ED pills, other treatments usually require a urologist:

Comparing Other Medical Treatments			
Therapy	Alprostadil injections	Alprostadil pellets	Vacuum pump
Onset of action	5–15 minutes	5–15 minutes	Immediate
Duration of action	60 minutes	30–60 minutes	While in use
Advantages	Highly effective (up to 80%)	Moderately effective (about 50%)	No prescription needed. Highly effective (up to 90%). No serious side effects.
Disadvantages	Requires training. Injections unpleasant for many men. May cause pain or painful sustained erections.	Requires training. May cause pain, usually mild. May cause dizziness.	Requires training. Cumbersome. May cause numbness or bruising.



To learn more about erectile dysfunction, visit the **Pri-Med Patient Education Center** at www.patientedu.org/ed

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Pri-Med Patient Education Center
2127 2nd Ave North
Fort Dodge, IA 50501
service@patientedu.org

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Consulting Physicians: Harvey B. Simon, MD and Anthony L. Komaroff, MD
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