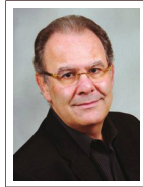


JUST THE FACTS

TREATMENTS & OPTIONS AVAILABLE

Managing Impotence, or Erectile Dysfunction

Male impotence—what doctors refer to as erectile dysfunction (ED)—is not considered normal at any age, and you should certainly not shrug your shoulders and pass it off as “just a symptom of getting older.”



By Bashar Omarbasha, MD
Board-Certified Urologist

Nor is impotence the transient problem—one that affects many men from time to time—of failure to get an erection because of too much alcohol, tiredness, or any other definite, short-term reason. It's when this failure occurs more than 50% of the time that an occasional problem or embarrassment becomes one requiring medical attention. It is estimated that about 1 in 10 men suffer from ED. As men age, the rate of impotence rises.

One reason you should visit your doctor if you have ED is that it could be the sign that another ailment—such as heart disease, high blood pressure, or diabetes—is affecting blood flow. Impairment of blood flow into the penis, or the inability to store blood in an erection, are the most frequent causes of ED.

Other possible physical causes include nerve damage, side effects of prescription medications, smoking, high cholesterol, excessive alcohol consumption, and hormonal problems, such as low testosterone or diabetes. Doctors now believe psychological causes play a lesser role in ED than physical ones; nevertheless, stress, anxiety, and depression—sometimes brought on by the condition—can exacerbate it.

The good news is that ED is treatable, and advances in doctors' understanding of the condition mean that many options are available. Because men respond differently to varying therapies, what works for someone else might not work for you.



Talking with your partner is essential during treatment.

TREATMENT

Oral Medications

Many men have heard about the phosphodiesterase (PDE) inhibitors called sildenafil, vardenafil, and hydrochloride tadalafil—better known as Viagra, Levitra, and Cialis, respectively. Effective at treating ED caused by inhibited blood flow, they work by relaxing muscles in the penis. Your doctor can determine which medication, and in what dose, is right for you.

Alprostadil

This is an approved ED drug that can either be injected into the penis or placed into the urethra in suppository form. The success rate is very good, although side effects such as a burning feeling in the penis or prolonged erection (“priapism”) have been reported.

Vacuum Devices

Mechanical vacuum devices help engorge the penis thanks to a pump that creates a partial vacuum in a tube placed over the penis. To maintain the erection, a rubber ring can be used at the base of the penis.

Surgery

Severe ED cases may require one of three surgical interventions: the placing of a prosthetic device in the penis, such as an inflatable implant; reconstruction or repair of arteries to increase blood flow; or the blocking of veins that are causing blood to leak out of an erection.

Counseling

Counseling—such as couples therapy or sex therapy—may be suggested if your ED has no physical cause and is instead the result of stress or relationship problems. A therapist might help with better everyday communication skills and suggest new ways to be intimate or to initiate love-making so that the “pressure to perform” is reduced.

Communication

It's important to be patient when treating your ED, which can be a frustrating condition for both partners. Open sharing with your partner is essential so you can both work through complex emotions, stay positive, and enjoy a successful treatment.