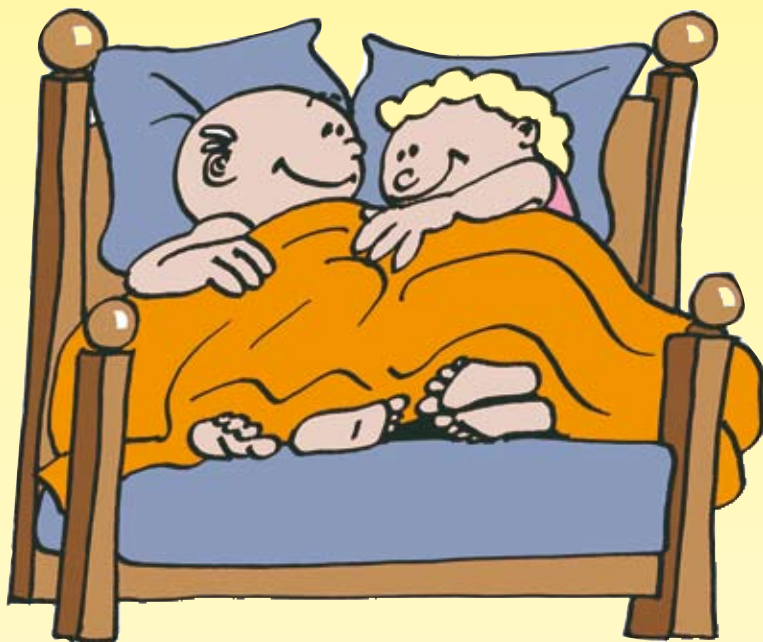


# SEX and DIABETES...



## Seek Help!

**Erection problems aren't 'all in the mind'.**

**Around a third of men with diabetes can experience some form of erection problem.**

**Don't despair if you think you have a problem**

## ...Do seek help!

Don't worry about talking to your doctor or nurse about your sex life – they want to help and they understand that it is important to you – it's natural.

This leaflet is for men with diabetes and their partners, who may want to find out more about erection problems so that they can continue to enjoy or, indeed, return to an intimate and fulfilling sex life.

# Taking a healthy sex life for granted?

Sex is an important part of an intimate and happy relationship for most couples whether in younger or later life. A disappointing or unfulfilling sex life can often damage a relationship, leaving either partner feeling 'alone', insecure and often embarrassed to seek help and/or to start a new relationship.

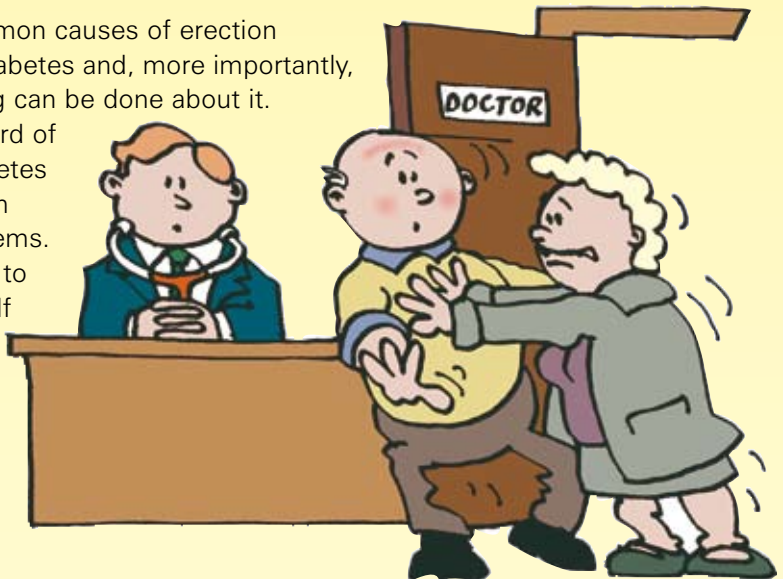
One of the most common sexual problems faced by men is Erectile Dysfunction ('ED' or impotence). Erectile dysfunction is the medical term for a difficulty in achieving or keeping an erection good enough for sexual intercourse. Generally, erection problems affect about one in every 10 men.

Years ago, it was thought that erection problems were mainly caused by emotional or psychological issues. But it is now widely accepted amongst doctors and nurses that erection problems are most commonly due to an underlying medical condition. Having said that, erection problems will often have some psychological effect on the man and a partner, even if the main cause is physical.

**Anyone with diabetes who is having problems with their sex life should talk to their doctor or nurse**

Not enough men or their partners understand that one of the most common causes of erection problems is diabetes and, more importantly, that something can be done about it.

Almost one third of men with diabetes can suffer from erection problems. This increases to as many as half of men with diabetes who are over the age of 60.



## Understanding diabetes

Diabetes in itself can be a distressing condition. If you have, or your partner has, already been diagnosed with diabetes your doctor or nurse will have explained that it occurs when the amount of glucose (sugar) in the blood is too high because the body cannot produce enough of the hormone, called insulin, to help convert the glucose into essential 'fuel' for the body.

There are two main types of diabetes:

- Type 1 - when the body cannot make any insulin at all. Therefore insulin treatment is necessary.
- Type 2 - when the pancreas gland makes too little insulin, and when the body gets resistant to the effects of the insulin. Often treated with tablets but insulin may be necessary eventually.

Treatments for diabetes aim to keep the glucose, blood pressure and cholesterol levels in the body as near to normal as possible. A healthy lifestyle, together with medical treatment for diabetes will help to keep you generally healthy and avoid longer-term problems with the nerves, arteries, heart, kidneys, eyes and feet.

The common signs of undiagnosed or poorly controlled diabetes are increased thirst, having to go to the loo, toilet or washroom to pass water more often (often at night), tiredness, weight loss, and blurred vision.

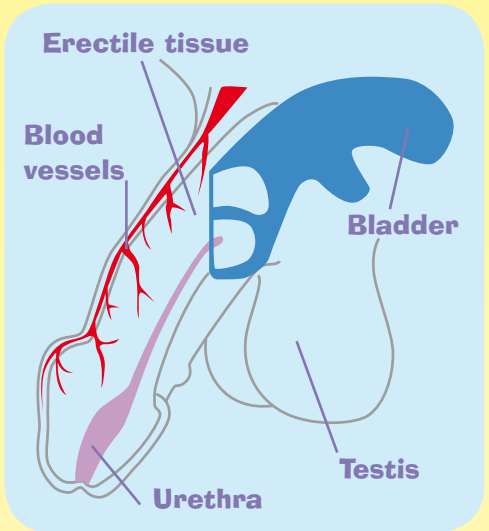
The added complication for men can be difficulty in getting or keeping an erection for a fulfilling sex life.

## Why is diabetes linked to erection problems?

It is important for diabetes to be diagnosed as early as possible and then for it to be well controlled with the right treatments and followed up with regular checks at a diabetes clinic. Good self-care and good medical care will help to avoid complications causing damage in the body. It is the effect of these complications that most commonly

cause erection problems.

For a man to get an erection he needs to be sexually aroused. Signals then travel from the brain through the nerves to the muscle and blood vessels (arteries) in the penis. The muscle and arteries in the penis then relax and widen so that more blood can flow into the penis. The penis then expands and hardens and the veins that normally carry blood away from the penis become tightened, limiting the blood flow draining out of the penis. As long as more blood travels in and less out, the penis gets bigger and an erection is obtained and maintained as long as this process continues.



In diabetes, erection problems generally happen due to complications damaging the muscle, arteries or nerves in the penis. In Type 1 diabetes, this is usually some years after the diabetes has been detected and diagnosed. Type 2 diabetes on the other hand, can often go undetected for many years and complications including ED may be a warning sign for previously undetected or undiagnosed diabetes. ED can also be a warning sign of previously undetected heart and circulation disease.

Of course, problems with erections or your sex life may not be due to the physical effects of your diabetes at all.

It may be that just the worry over your diabetes is affecting your interest in sex generally. As many as one in four men with diabetes may have erection problems because of emotional factors rather than the cause being physical.

**Help yourself and your partner  
gain a fulfilling sex life.**

**Talk to your doctor or nurse**

## What other medical conditions are linked to diabetes and erection problems?

The long-term effect of diabetes on the arteries/blood vessels means that men with diabetes, particularly those with Type 2 diabetes, are at higher risk of developing high blood pressure, heart disease, heart attacks and stroke. These effects of diabetes are caused by damage to the walls of the blood vessels, which can then become blocked. These effects also increase the likelihood of a man getting erection problems.

Three in every five men can experience some form of erection problems following a heart attack

There are also effects on the smaller blood vessels. If left untreated or uncontrolled, this can lead to damage to the eyes and kidneys. Occasionally, severe kidney damage can lead to the need for dialysis and kidney transplant. However good control of your diabetes blood pressure and cholesterol will reduce the risk of these complications.

Good control of diabetes reduces the risk of complications

Almost half of men with kidney disease and over one third of men on dialysis are also affected by erection problems

## Your questions answered...

Generally, men are far too embarrassed to ask questions about their sex life. These are just some questions that they do often ask when they pluck up the courage to talk. If you are reading this for your partner, you will be able to reassure him with some of the answers.

**Q** *I haven't had any erection problems yet, but will I in the future?*

**A** Having diabetes doesn't automatically mean that you will have problems with your erections or your sex life generally. You and your partner should be aware that this could happen but you shouldn't worry about it, because the worry in itself may cause unnecessary tension and

affect the intimacy in your relationship. If you do notice any changes in your sex life though, try not to be embarrassed to talk to your doctor or nurse – they are there to help you and there are good treatments available.

## **Q** *How do I know if my erection problems are caused by diabetes?*

**A** If you wake up with an erection in the morning, but you cannot get an erection when you want to have sex, then the cause is likely to be due to psychological factors such as stress or anxiety.

If, however, you notice a gradual worsening of your erections over a longer period of time and you also notice that early morning and night-time erections no longer occur, then the cause is more likely to be physical and linked to the diabetes or other conditions affecting the body.

Smoking is also an important cause of erection problems and in combination with diabetes is very dangerous to the heart and circulation as well.

It is very common even for men with a physical cause for their erection problems to suffer some psychological effects.

**Ask your doctor or nurse for advice**

## **Q** *Are erection problems more common with Type 1 or Type 2 diabetes?*

**A** ED may occur in both types of diabetes. In Type 1 diabetes it is more likely to be related to complications affecting the smaller blood vessels reducing the response of the muscles around the blood vessels in the penis. In Type 2 diabetes, there are often also the added risk factors of high blood pressure, abnormal blood fats, heart and circulation problems and obesity. Smoking makes matters worse in both types of diabetes. Therefore stopping smoking and good control of risk factors is very important.

## **Q** *I'm afraid I'll have a 'hypo' during sex – what should I do?*

**A** Hypos are probably one of the biggest fears for people with diabetes, particularly those on insulin treatment. It is not uncommon for people with diabetes to be afraid of or embarrassed about an intimate situation or sexual intercourse because they think they may have a hypo. Your doctor or nurse will have told you that the best way to avoid hypos, generally, is to aim to keep your diabetes well under control with your medication. If your diabetes is well-controlled, then there should not be any reason for hypos getting in the way of your sex life. Consider sex to have the same effect on your blood sugar as mild/moderate exercise and treat it similarly. This of course applies equally to men and women.

Explain to your partner, if they don't already know, that you have diabetes. Try to help them understand what is meant by a hypo, how this can be recognised and what they can do if you were to have one. If you are still nervous, then as always, it is better to play it safe. Check your blood sugar, before exercise or having sex even if you think this is very inconvenient. It is always important to have a source of glucose with you, and in important places such as next to the bed. Remember – if you're still unsure your doctor or nurse is there to help.

## **Q** *My diabetes caused me to have a heart attack. Now, I always worry about having sex – is it safe?*

**A** The risks of having sex, even after a heart attack, are minimal. Sex is a form of exercise and if your doctor or nurse has given you a thorough check up and knows you are fit, then returning to your normal sex life should not be a worry. You should not be at any increased risk because of your heart condition.

Talk about your daily exercise with your doctor or nurse. Sex uses a similar amount of energy as walking briskly for 20 minutes on the flat. If you are unfit, your doctor will recommend an exercise programme and advise that you

and your partner return to your normal sex life once you have regained your fitness. If in doubt an exercise ECG heart test can be helpful.

### **Q** *Could my diabetes medication be the cause of erection problems?*

**A** It is unlikely that your normal diabetes treatment will be the cause of any erection problems. It is more likely that the effect of diabetes on the body itself or your worry about your diabetes will be the cause.

If you are taking treatment for high blood pressure or heart disease, however, this could be linked to a change in your erections. Your doctor will be able to find out if this is the case by asking when you first noticed having erection problems and checking when you first started on the specific medication. Changing your blood pressure or heart disease treatment will not necessarily be the answer to your erection problems. It is critical that you do not stop or change your medication without speaking and agreeing this with your doctor or nurse.

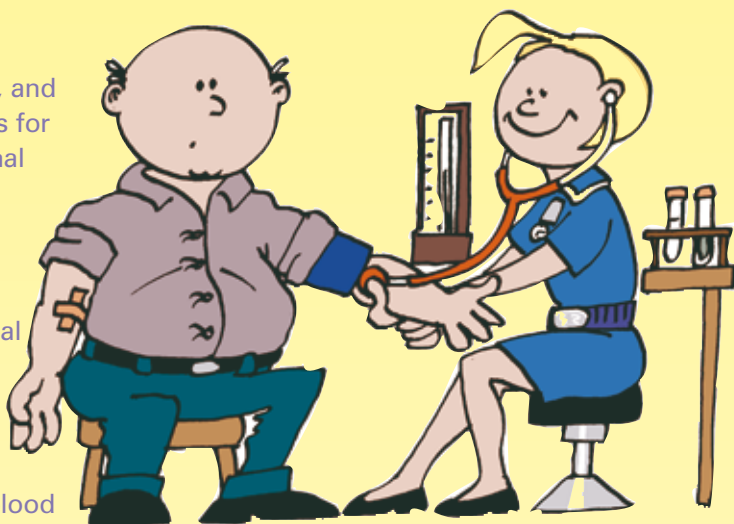
### **Q** *What will happen when I go to the doctor's surgery about erection problems?*

**A** You should try and feel at ease when discussing any problems with your sex life. You should feel able to talk about it with the doctor or nurse as part of your routine check-up for your diabetes. Your doctor or nurse will probably then suggest that you make a specific appointment to talk about any erection problems as soon as possible. They may also suggest that, if you have a partner, you ask them to join you at the appointment. Obviously you and your partner both need to feel comfortable with this.

Men with diabetes visiting the surgery for erection problems need the same tests as anyone without diabetes. These include a fitness assessment, blood pressure measurement, blood tests – such as a fasting blood



glucose test and blood cholesterol, and sometimes checks for any other hormonal problems such as low testosterone or lack of thyroid hormone. More rarely, other special tests may be necessary to take a closer look at the efficiency of the blood and nerve supplies and the muscles in the penis. These are only really considered if treatment for erection problems does not seem to work.



Depending upon the cause of erection problems and how it is affecting your relationship and your life in general, you may wish, or be advised by your doctor or nurse, to visit a therapist to discuss the psychological effects or causes of any problems with your sex life.

## **Q** *What treatment can I take for erection problems if I have diabetes?*

**A** There are now a wide range of treatment options for men with erection problems. It is important that your doctor or nurse tries to find the cause of the problem before recommending any treatment. This will help to make sure it is the right treatment for you and your partner if you have one. It is also vital that your diabetes and any other linked conditions such as heart disease are well controlled before starting any treatment for erection problems.

Your doctor is the best person to advise you on the best treatment for you. The choice of treatment is best discussed with your partner. Treatments include tablets, vacuum pumps, injections and pellets. Less commonly surgery may also be discussed. Some form of counselling or sex therapy should also always be considered.

All drug treatments currently available in the UK can be used by men with diabetes, but they must only be prescribed by your doctor or healthcare professional.

Your doctor or nurse will ask you to return to the surgery or a hospital clinic on a regular basis to assess how well the treatment is working and to keep a close eye on your diabetes and any related conditions.

**Make sure you follow instructions carefully when taking your treatment – this can affect how well it works for you and don't give up too soon!**

## **Don't let your diabetes get you down – seek help now!**

Don't do what too many men do and avoid talking about issues with their sex life. Erection problems are very common and the right treatment option could well change your whole life for the better.

All too often a man or his partner will think a disappointing or changing sex life is their fault. In fact, it's nobody's fault and is very commonly caused by medical conditions. You would seek medical treatment for diabetes so why treat your sex life any less seriously?

**Remember always speak to your doctor or nurse before trying any medications for erection problems**

## Neale's Story...

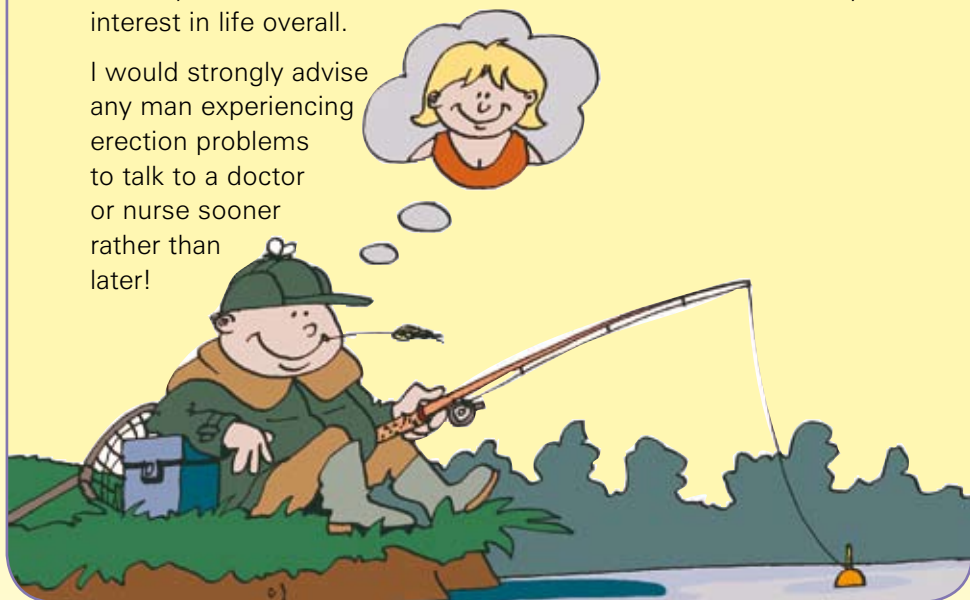
...how seeking help changed his life...

I was first diagnosed with diabetes when I was 40. After this I began to notice more and more problems with getting and keeping an erection. Even though I knew something was wrong, I was too afraid and embarrassed to go to my doctor. In the end, it took me two years to pluck up the courage to ask for help. But that's when life got a million times better.

Before that, erection problems were affecting my whole life. My wife thought I didn't find her attractive anymore. I thought it was my fault and convinced myself that I was no longer a man. I became depressed and felt completely inadequate. As the erection problems got worse I ignored my hobbies, began to hate my job which before I'd loved. I lost total interest in everything that was important to me. Of course, I didn't have a clue that my erection problems could be linked to the diabetes, otherwise I may have gone to my doctor a lot sooner.

Getting my erections back has meant I can focus on all the good things in my life that I'd neglected. Not only has my relationship with my wife returned to how it should be, but it's rekindled my interest in life overall.

I would strongly advise any man experiencing erection problems to talk to a doctor or nurse sooner rather than later!



**For further information on erection problems,  
treatments and other sexual conditions, contact:**

The Sexual Dysfunction Association  
Suite 301, Emblem House,  
London Bridge Hospital  
27 Tooley Street  
London  
SE1 2PR

**Helpline: 0870 7743571**  
**[www.sda.uk.net](http://www.sda.uk.net)**

Registered Charity No: 1104691



**Sexual Dysfunction Association**

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