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Impotence – what causes it and what to do about it

The myth is that men can't multi-task and that we think with our ... genitals. Neither of this is true but what is true is the perception of our attitude to sex and impotence. As young men our conquests were the stuff of men's business so that some years down the track, it's difficult to talk about impotence.

Erectile dysfunction actually starts at an early age and for young men it's usually called brewer's droop. Whilst alcohol may initially relax, excess leads to an inability to achieve an erection at any age. It can just as easily be related to illegal drug use. The scenario of a safe, secure and loving environment for love making is hardly enhanced by hitting the pillow in a deep sleep punctuated by loud snoring. Similarly the ravages of smoking commence at an early age so that its effects on erectile function are manifested years later.

Whether you are "getting a bit" is appropriately a bedroom issue and more importantly, "partner business" and an issue of closeness and a loving, caring relationship as well as the physical causes that may well be preventable. I hope that I'm painting a picture which indicates that the causes of male impotence are a mix of physical and emotional factors and not just an issue of inevitability which we can forget about until we are old.

To achieve an erection, a male must first be mentally, sexually stimulated, and so the brain and mind is involved. The sequences of events that follow are an increase in blood flow to the penis which is held in the penis and engorgement of penile tissue follows causing an erection. This sequence is important so as to understand the causes of erectile dysfunction and also the treatments for the problem.

It may surprise you to know that the big three physical causes for impotence are smoking, high blood pressure and high cholesterol. Diabetes Mellitus follows as does alcohol and drug use and thankfully ranked lower down in the causes are medications prescribed by your doctor.

More succinctly, the arteries and the nerves which supply the penis are damaged by these health risk factors.

So what should you do? The first start is a healthier lifestyle. Stop smoking; lose weight; eat low fat foods, exercise and have a blood pressure and general health check up with your GP.

Next have a look at the stress in your life, your work load and your relationship with your partner. Is love making a chore that you or your partner performs or an exciting part of your relationship? If you are taking medication, then don't be afraid to ask the question – can it reduce erectile function or delay an orgasm?

Treatments to improve an erection usually act by holding blood in the penis. So the image of taking a tablet and walking around with an embarrassing erection don't occur, because the very first step is mental stimulation. Not all treatments work for everyone, nor on the first occasion. Amazing technology may simply be that, amazing but not necessarily

effective. An injection into the penis sounds horrifying, but it is in the shaft and not the sensitive glands (or end) of the penis.

There are at least three medications on the market which require a prescription from your doctor and all three work as does the injection by holding the blood in the penis once the erection is initiated. Other treatments are available but care should be taken to ensure that adequate information is provided and the costs are reasonable.

Don't forget that your lover can be enlisted as a willing partner in the process. The use of soft lighting, creams or oils, a private and loving environment and of course safe sex all operate to defeat impotence. Most surveys suggest that for women, sexual satisfaction is judged least on size and performance and most on loving and closeness; that is cuddling and intimacy. As the NSW Health web site suggests – "its people who make good lovers, not drugs."

By Dr Brian Morton, GP'

