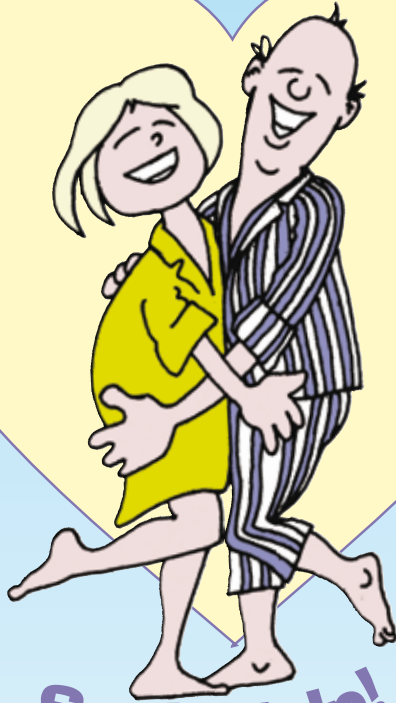


SEX and the HEART...



Seek Help!

**Erection problems aren't 'all in the mind'.
Three in five men with heart disease can experience some form
of erection problem.**

You're not on your own

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 heart disease 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.

What exactly is erectile dysfunction?

Erectile dysfunction ('ED') is the medical term for difficulty in achieving or keeping an erection good enough for a fulfilling sex life. Erection problems are very common, far more common than you may think. At least one in every 10 men suffers with erection problems and the chance of experiencing erection problems increases as a man grows older – to about one in every three men.

Erection problems were once thought to be caused most commonly by psychological or emotional reasons, such as the breakdown of a relationship, worries about work or just general stress. Nowadays, medical experts know that physical ailments – many of those linked to growing older, such as heart disease and high blood pressure or diabetes – are the most common causes. However, most men with erection problems will have a mix of both physical and psychological causes.

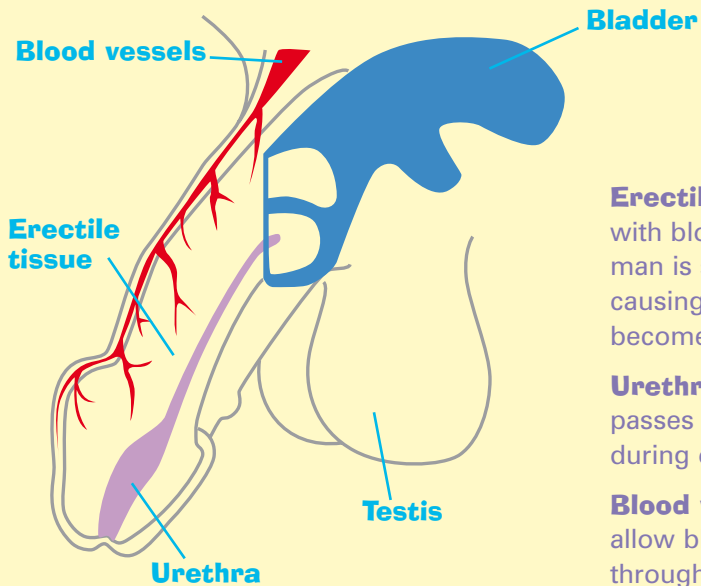
It's important to remember that ageing in itself is not a true cause of erection problems. It is often underlying conditions related to growing older which can be the cause and younger men can also suffer from erection problems.

Common causes of erection problems linked to the heart

- heart disease of all types
- high blood pressure (treated and untreated)
- narrowing arteries
- diabetes
- side-effects of medication

How does an erection occur?

When a man is sexually aroused, signals pass from the brain through the nerves to the blood vessels, which supply blood to the penis. The arteries in the penis relax and widen, allowing more blood to flow into the penis. As the arteries in the penis expand and harden, the veins that normally carry blood away from the penis become compressed, slowing down the blood flow out of the penis. With more blood flowing in and less flowing out, the penis enlarges, resulting in an erection.



Erectile tissue – fills with blood when the man is sexually aroused, causing the penis to become erect.

Urethra – semen passes down this tube during orgasm.

Blood vessels – these allow blood to circulate through the penis.

Are there different types of erection problems?

A gradual problem

Men with heart disease, hypertension (high blood pressure) or atherosclerosis (narrowed arteries) may notice a slow but continuing change in being able to achieve or maintain an erection. The same process, which can cause heart disease and linked conditions, also affects the penis. When arteries in the general circulation become blocked, this restricts blood flow to the heart and can cause heart disease. When arteries in the penis become blocked, blood flow to the penis is restricted, which is necessary for an erection.

In general, morning and night-time erections, without any form of sexual encouragement, are a sign of everything working normally. With a 'gradual' type of erection problem, it is common for natural morning and night-time erections to become increasingly uncommon.

A sudden problem

Men with erection problems of a more emotional cause can often pinpoint the very first time it happened. It may be linked to a particular event (or run of events) in their life – such as being made redundant, a divorce, bereavement or an operation (such as that for a prostate problem).

Morning and night-time erections usually still occur, and the problem may only happen sometimes.

An occasional problem

Very few men go through life without now and again having a problem with erections. Drinking too much alcohol, stress, anxiety or loss of confidence, can be the cause of an occasional problem.

A poor lifestyle including unhealthy eating, smoking, recreational drug use and lack of exercise are also common causes of erection problems.

Remember your doctor, nurse or pharmacist is there to help!

Your questions answered...

It's very common for men to be too embarrassed to ask questions about their sex life. These are just some that they often do ask when they pluck up the courage. If you are reading this for your partner, you will be able to reassure him with the answers – try to put yourself in his place.

Q *I am being treated for heart disease and have erection problems – are the two related?*

A Only your GP will be able to help answer this for certain, as there are a number of illnesses that cause damage to nerves in the penis, or restrict blood flow which may cause erection problems in some men. Every man is different. Sexual difficulties sometimes begin after heart bypass surgery, a heart attack or from medication for heart disease or high blood pressure.

Q *So, is my medication to blame?*

A You may have noticed erection problems starting around the same time as your doctor prescribed treatment for a heart condition or high blood pressure. Certain medications can affect the ability to get or keep an erection. Your doctor can review whether there is a strong link between medication for your heart condition and erection problems. Usually, changing your regular medication will not be the answer to improving your erections. Only your doctor can advise on this.

It is critical that you do not stop taking or change your regular medication without your doctor's advice.

Q *Can I have sex again after a heart attack?*

A If you have had a heart attack, you or your partner may well be nervous that having sex will cause you to have another attack. Even just the worry about this could be enough to cause tension in the bedroom and, as a result, a problem with getting an erection.

The risk of you having another event when returning to your normal sex life after, or with a heart condition, is very small, but is slightly higher than for someone who has never had a heart problem. You should always speak to your doctor or nurse about this.

- If you take regular physical exercise you reduce the risk of a heart attack by half
- In the general population there is a very small risk that sexual activity will be the cause of a heart attack

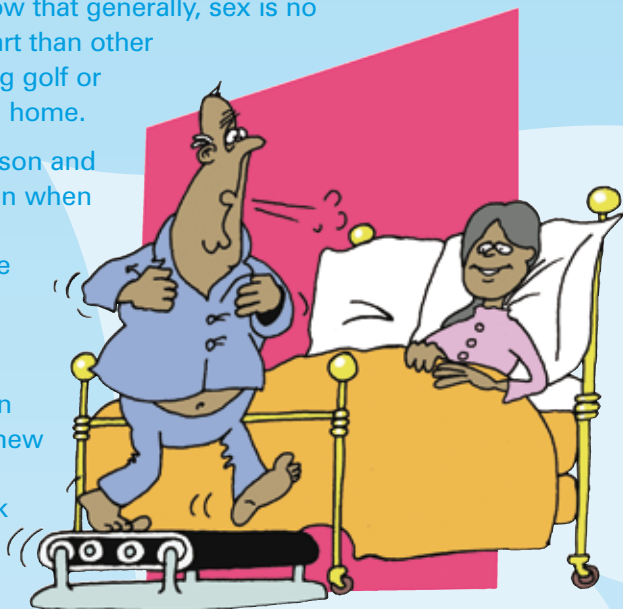
Talking about your daily exercise can help your doctor or nurse check when you can return to your normal sex life...

- sex uses a similar amount of energy as:
 - walking briskly for 20 minutes on the flat
 - walking for 15 minutes on the flat and up one flight of stairs (20)

It helps to get fit for sex!

It should help you to know that generally, sex is no more stressful to the heart than other daily activities like playing golf or carrying heavy shopping home.

Although there is no reason and no particular time limit on when you can return to your normal sex life, everyone does activities with different amounts of energy. The amount of exertion also depends on whether you are with a new or established partner. You should always check with your doctor or nurse before resuming sexual activity.



Q *What happens at the doctor's surgery?*

A During a health check your doctor or nurse will assess the level of 'risk' to you as an individual in resuming your sex life.

A full medical assessment will check if there is any risk associated with returning to a normal sex life, based on your overall health at that time. The health check will include talking about the amount of daily exercise you do and other simple tests to monitor your heart condition and blood pressure. You will be advised to avoid excess alcohol and heavy meals and stop smoking.

Following the check up you will be told whether you can restart your normal sex life, whether you should wait for a short while and start on a planned exercise programme, or you may need to see a doctor or nurse at the hospital who will conduct some further tests such as a treadmill test. These tests will help you on your way to returning to a fulfilling sex life.

Please remember
– always follow
the advice of your
doctor or nurse

Q *If I have heart disease or high blood pressure, what treatments are there for erection problems?*

A It is important that your heart condition is well treated and your blood pressure under control before taking treatment for any problems with erections. At the same time, neither you nor your doctor or nurse, should think too little of the importance of a healthy sex life and the fact that treatments can help you and your partner.

Treatments for erection problems include tablets, vacuum pumps, injections, and pellets. Some form of sexual counselling should always be considered.

All drug treatments for ED, currently available in the UK, can be taken by men with heart disease or high blood pressure, but they have to be prescribed by a doctor. You should never try any treatment without the advice of a doctor, nurse or pharmacist. Because there might be interactions, especially with nitrates. Your doctor, nurse or pharmacist will explain how different treatments work and that some options will be more suitable than others for your problem. If you have a partner, the choice of treatment should be a decision you make together. After all, a fulfilling relationship is about two people.

Erection problems – common myths

It's all in the mind

IT'S NOT! The most common causes of erection problems relate to a physical cause such as heart disease, high blood pressure, diabetes or depression.

It's my fault or my partner's

IT'S NOT! It's nobody's fault. Erection problems are a medical condition, caused by other medical conditions or emotional factors.

It's an 'old man's problem'

IT'S NOT! Erection problems can occur at any age and sex at any age is part of a healthy life for couples.

IT'S NOT! Problems with loss of sexual desire and erectile dysfunction are very different medical conditions.

Loss of sexual desire (libido) is the same as erection problems

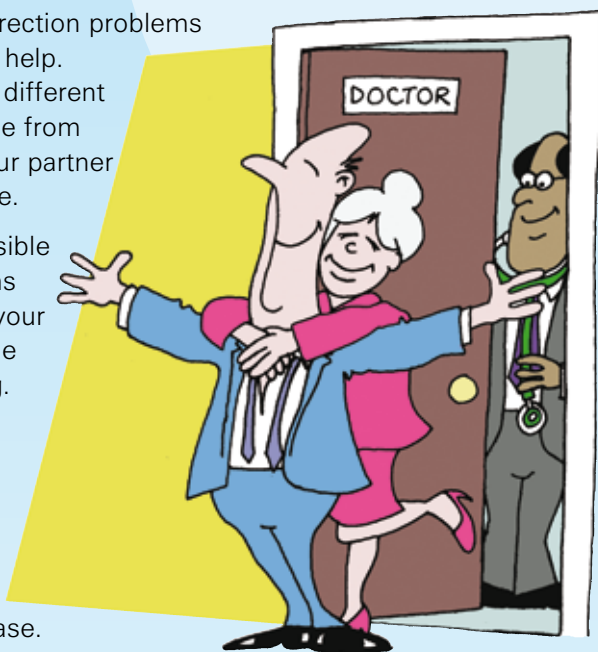
Sex can be bad for the heart

IT'S NOT! Sexual activity is a form of exercise and exercise is good for the heart. But physical fitness is vital before any type of exercise – check yourself out with your doctor or nurse!

Don't be fainthearted... Seek help now!

Too many men who have erection problems are embarrassed to ask for help. Nowadays, there are many different treatment options to choose from which can help you and your partner return to an intimate sex life.

Finally, there are many possible causes of erection problems that could be unrelated to your heart disease. These include hormone abnormalities, e.g. low testosterone or lack of thyroid hormone, diabetes, high cholesterol, stroke, depression, multiple sclerosis, kidney/liver disease or an operation for prostate disease.



Help yourself to talk about it

These simple questions are for men with a heart condition who may think that they have a problem with getting or keeping an erection for a fulfilling sex life. They should provide a guide for helping you discuss an erection problem with your doctor or nurse.

Which of the following age brackets relates to you?

- A 20–35 years
- B 36–40 years
- C 40+ years

Do you know if you have a heart condition, high blood pressure or clogged arteries?

- A No
- B Maybe
- C Yes

Did you notice a sudden problem with your erections?

- A Yes
- B Don't know
- C No

Have you noticed that your problem with achieving or keeping an erection is gradually getting worse?

- A No
- B Maybe
- C Yes

Have you noticed that morning erections are less frequent?

- A No
- B Maybe
- C Yes

Have you noticed a change in your erections since taking medication for a heart condition?

- A No
- B Perhaps
- C Yes

Do you get easily out of breath walking up two flights of stairs?

- A No
- B Sometimes
- C Yes

Are you or your partner nervous about having sex because of a heart problem?

- A No
- B Sometimes
- C Yes

What do your answers mean?

Mostly 'A's?

If you answered mostly 'A's, then any problems you have with achieving or keeping an erection are unlikely to be related to a heart condition or high blood pressure. Think about what else may be affecting you and talk to your partner, your doctor or nurse.

Mostly 'B's?

This means that you could be generally unsure about whether you have a problem with achieving or keeping erections and your overall health. Again talk to your doctor or nurse, they will be able to help you.

Mostly 'C's?

You are likely to be worried about problems with achieving or maintaining an erection and this could well be linked to another condition. Talk to your partner if you have one, make an appointment with the doctor or nurse and seek help. It will be worth it.

Remember always speak to your doctor, nurse or pharmacist before trying any medications for erection problems.