

MANY MEN USED ED TREATMENT WITHOUT THEIR PARTNERS' KNOWLEDGE

Low WY, Ng CJ, Choo WY, Tan HM. How do men perceive erectile dysfunction and its treatment? A qualitative study on opinions of men. *The Aging Male*. 2006;9(3):175-80 (Full text can be purchased from the journal website of Taylor & Francis: <http://taylorandfrancis.metapress.com/content/g747332092251563/>)

This paper aimed to identify and explore the understanding and perception of erectile dysfunction (ED) using exploratory qualitative approaches. This study was conducted in Klang Valley, Malaysia. Purposive sampling was used to recruit 17 urban men aged 40-75 years. A semi-structural interview guide was used to explore men's understanding of ED, impacts on their well-being and experiences with treatments.

The focus groups revealed that ED was perceived to be an important loss in men's lives as sexual performance was closely related to manhood. The men associated ED with a loss of masculinity and self-esteem. Men's understanding of ED treatments was restricted to phosphodiesterase type 5 inhibitors (PDE-5 inhibitors) and traditional therapies. Although PDE-5 inhibitors were perceived to be effective, they were concerned about their safety and costs. Some of the men have learned to cope with ED rather than to seek help, particularly among older men, who attributed their decreased sexual capacities and erection difficulties to aging, and therefore conditioned themselves to accepting it. In contrast, younger men who have erection difficulties are considered as 'abnormal', and are more likely to seek help and receive treatment for their sexual problem. Men's knowledge of and experience with modern treatments of ED were mainly associated with PDE-5 inhibitors. Their perception towards PDE-5 inhibitors was largely influenced by personal experience, information from mass media and friends. The high cost and fear of side effects were two main deterrents in the use of PDE-5 inhibitors. Many men had conceded their use of PDE-5 inhibitors without their partners' knowledge. They worried that their partners would view the matter with suspicion and mistrust.

Editor's note: No reprint is available from the authors. Please access the website for full text.

MEN WITH ED ARE MORE LIKELY TO BE DEPRESSED

Low WY, Khoo EM, Tan HM, Hew FL, Teoh SH. Depression, hormonal status and erectile dysfunction in the aging male: results from a community study in Malaysia. *Journal of Men's Health and Gender*. 2006; 3(3):263-70 (Full text can be purchased from the journal website: www.jmhjournal.org or via ScienceDirect: www.sciencedirect.com)

This paper examined the association between depression, erectile dysfunction and hormonal status among aging men and factors predictive of their erectile function, based on a community-based survey involving 351 men living in the Klang Valley, Selangor. The International Index of Erectile Function (IIEF-5) was used to assess the presence of erectile dysfunction and its severity while the 15-item Geriatric Depression Scale (GDS-15) was used as a screening instrument for depression.

14.5% of men were found to have mild/moderate depression while 11% had severe depression. Men with ED have significantly higher GDS scores, higher levels of SHBG* and higher proportion of abnormal hormone levels (PSA*, SHBG, LH*, total testosterone, free testosterone, bio-available testosterone, prolactin and IGF-1*), compared to men without ED. ED was associated with depressive symptoms and aging, however, no association between total testosterone and depression. Age and depression explained 18.2% of the variance in erectile function. Total testosterone, LH, free testosterone and SHBG did not predict erectile function scores. In the management of ED or depression, cardiovascular disease should also be screened for. These conditions are often missed if either condition is dealt with in isolation.

*SHBG, sex hormone binding globulin; PSA, prostate specific antigen; LH, luteinizing hormone; IGF-1, insulin-like growth factor.

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