Burlington Urology 460 Brant St. # 12 Burlington, ON

Erectile Dysfunction Treatments

Erectile dysfunction is a common and distressing problem for men and their partners. Fortunately, there are a number of treatments available, and it is almost always possible for men to achieve satisfactory erections with treatment. Your Urologist will review your medical history and the results of relevant investigations to suggest treatment options most likely to benefit you. The following is a brief overview of treatments available for erectile dysfunction.

Lifestyle Modification

Risk factors for erectile dysfunction include smoking, excessive alcohol consumption, obesity, hypertension (high blood pressure), and diabetes. Erectile dysfunction may be the first warning sign for cardiovascular disease, increasing the risk of future heart attack or stroke. To optimize your erectile function and screen for other potentially serious conditions, all men are encouraged to consult with their family physicians for routine checkups. If you have medical conditions, it is important that they be well controlled. For example, men with diabetes will suffer more rapid loss of erections if their blood sugars are poorly controlled.

The mind is obviously vital to sexual function. Some erectile dysfunction is entirely "psychogenic" – resulting from anxiety, depression, or stress. If you have excellent erections in certain circumstances (such as masturbation) but poor erections in other circumstances (such as intercourse), there is probably a major psychogenic component. Furthermore, many men with organic (ie: non-psychogenic) erectile dysfunction suffer an additional psychological impact, leading to a vicious cycle of worrying about erections which results in worse erections which, in turn, results in more worry, and so on. Seeing a sexual health counsellor, psychologist, or psychiatrist can benefit men with all types of erectile dysfunction. You can find a sexual health counsellor at www.bestco.info.

PDE5 Inhibitors

Oral medications such as Viagra (sildenafil), Cialis (tadalafil), and Levitra (vardenafil) are first-line treatment options for erectile dysfunction. They delay the breakdown of chemical messengers involved in erections in order to achieve stronger and longer-lasting erections. They are generally safe, except for men with severe heart disease, or in men who take nitroglycerin for angina. These drugs may be taken about an hour before planned sexual activity. Alternatively, low dose Cialis may be taken daily such that sexual activity does not need to be pre-planned. Common side effects include headache, backache, and facial flushing.

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Shockwave Therapy

Poor blood flow to the penis is the most common cause of erectile dysfunction – this is known as "vasculogenic erectile dysfunction." Low-intensity shockwave therapy involves directing focused soundwaves to the erectile bodies of the penis to stimulate the growth of new blood vessels. Treatment is typically painless and without any serious risks. A standard course of treatment consists of onceweekly 15 minute treatment sessions over 6 weeks. Some patients may opt for up to 10 treatments.

Low-intensity shockwave therapy is a treatment option for men with mild to moderate erectile dysfunction. Trials comparing shockwave therapy to placebo (or "sham" treatments) suggest a significant benefit for men with mild to moderate erectile dysfunction (see, for example, "Systematic Review and Meta-Analysis of 16 Randomized Controlled Trials of Clinical Outcomes of Low-Intensity Extracorporeal Shock Wave therapy in Treating Erectile Dysfunction by Huibao et al., American Journal of Men's Health, 2022").

Shockwave therapy may be a good option for men who want to improve their natural erectile function without the use of medications. The main disadvantage is the cost associated with treatment (it is not covered by OHIP). At Burlington Urology, we use the state-of-the-art Storz Duolith SD1 for focused shockwave treatments. The cost per session is \$333.33.

Testosterone Replacement Therapy

Testosterone is vital for erectile function. Your Urologist will measure your testosterone levels to determine if low testosterone may be contributing to your erectile dysfunction. Testosterone may be naturally raised by weight loss, as body fat contains an enzyme ("aromatase") that converts testosterone to estrogen.

Some men may benefit from testosterone replacement therapy. Testosterone may prescribed as a gel that is applied to the skin or as patient-administered injections. Testosterone replacement is often particularly beneficial for men with low testosterone who are also suffering from a low libido. Men on testosterone replacement must do periodic blood work to monitor for potential complications and should expect their testicles to gradually shrink/atrophy. Men wishing future fertility should not take testosterone replacement but may benefit from other treatments available from an endocrinologist (a hormone specialist) which indirectly raise testosterone.

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Vacuum Pumps

A penile vacuum pump creates negative pressure to draw blood into the penis. A ring may be placed at the base of the penis to maintain the erection. Our nurse can show you how to properly use a vacuum pump. Pumps can be purchased from us or online or at sex shops. We also offer rentals of vacuum pumps for men who aren't sure if they want to purchase one, or for short-term treatments.

Intracavernosal Injection Therapy

Men with more severe erectile dysfunction which has not responded to less-invasive treatments may benefit from intracavernosal injections. Our nurse can teach you how to use a small needle to inject a medication ("Caverject" or "Triple Mix") directly into your penis to cause an erection. It is important to learn the proper technique and dosing to minimize risks.

Surgery

Some men who fail other treatments may benefit from surgery for erectile dysfunction. This generally involves insertion of a prosthesis in the penis. Some prostheses are malleable – the patient bends the penis up when he wants an erection. Other prostheses involve a pump in the scrotum which brings fluid into prosthetic tubes in the penis shaft.