



DIABETES AND SEXUALITY

GOOD PROSPECTS FOR LOVE

Living as normal as possible

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A full and satisfying sex life is determined by a number of factors. Next to a functioning relationship, psychological aspects are the main factors in fulfillment and satisfaction in both women and men. However, the physical functions must also be in tune to experience desire without worries.

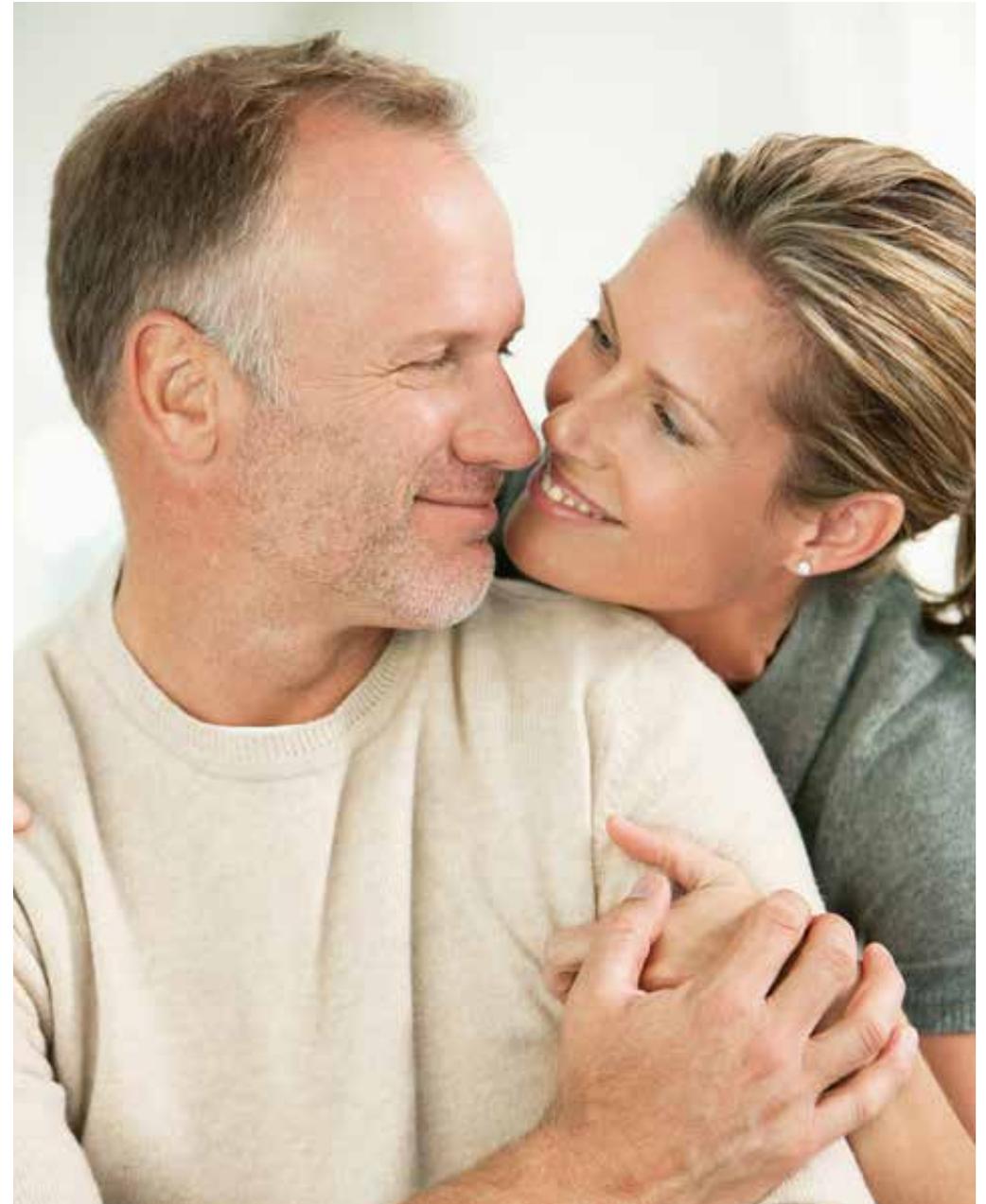
This requires intact nerves and blood vessels, which are often affected by high blood glucose levels in diabetic patients.

Side effects of medication, as well as psychological problems arising from the demands of everyday life, can also pose a burden for those affected. As a result, people with diabetes often no longer enjoy their love lives in ways that would otherwise suit their circumstances or age.

YOU ARE NOT ALONE

Erectile dysfunction is very common in male diabetes patients. Studies report that between 30 and 90% of men with diabetes are affected.¹ Both age and the duration of diabetes increase the risk of developing erectile dysfunction. In addition to erectile dysfunction, there may also be a lack of ejaculation, delayed or absent orgasm, phimosis or inflammation of the glans. Insufficient levels of the hormone testosterone are also possible.² However, the diagnosis "erectile dysfunction" does not necessarily have to persist for a lifetime. There are numerous pathways to resumption of a happy intimate life – even with diabetes.

First and foremost: speak openly about your problems – with your partner and with a doctor or diabetes team you trust! Do not barricade yourself behind a vicious circle of isolation, self-doubt, guilt and shame. Internet forums can offer initial help with such difficulties. After sharing experiences with others anonymously, those affected are often willing to make the long postponed visit to the doctor, or open up to their partners.





There are many possible causes of erection problems

Your doctor will first try to identify the individual causes of your problem during the consultation. Frequent reasons for erectile dysfunction in diabetes include:²

- ✓ Damage to blood vessels, especially in the penis
- ✓ Damage to nerves
- ✓ Side effects of antidiabetic drugs, including, for example, various glucose-lowering drugs, antihypertensive drugs, antidepressants and tranquillisers
- ✓ Psychological problems, e. g. depression, fear of failure, partner problems as well as health worries
- ✓ Hormonal disorders
- ✓ Chronic pain

Erectile dysfunction can also be an early warning sign for cardiovascular problems. Your doctor will therefore also continue examining you for such diseases for the foreseeable future.

Tips on treatment of erectile dysfunction

Many measures for the treatment of diabetes mellitus are also suitable for eliminating or alleviating erectile dysfunction.

These include:²

- ✓ Near-normal blood glucose control
- ✓ Reduction of overweight
- ✓ Nicotine abstinence
- ✓ Moderate consumption of alcohol
- ✓ Varied and lifestyle-adapted diet with few(er) calories
- ✓ Regular exercise

Particularly promising in therapy of erectile dysfunction is changing harmful lifestyle habits. Your doctor can also advise you on further suitable measures. A psychological consultation, ideally together with your partner, should support the therapy.

Generally speaking, there is no reason why medication should not be taken to treat erectile dysfunction in diabetics. Particularly well known here are substances that promote blood circulation such as tadalafil, sildenafil and vardenafil. All substances are prescription only. Your doctor is therefore the best person to determine whether to recommend this approach for you.



Please purchase all preparations of this class from reputable pharmacies only, since numerous imitations of dubious origin and questionable effectiveness are in circulation!

If a preparation does not show any effect, switching to a different one may prove helpful. In addition, mechanical aids such as tensioning straps or vacuum pumps, an injection into the erectile tissue – initially under medical supervision – or penis blood vessel surgery are among the possibilities.²



WOMEN ARE EQUALLY AFFECTED

Female diabetic patients may also suffer a loss of libido or various physical impairments in the genital area due to diabetes. According to a U.S. study, one in four female diabetic patients is dissatisfied with her love life, and in the case of women on insulin the figure is as high as one in three. The most common reasons for an unfulfilled sex life in women were dry vagina and difficulties with orgasm. This results in pain during sexual intercourse and, with continuing problems, more and more sexual reluctance and fear of further disappointment.³

Speak openly about your problems

As in men, shame or self-doubt keep many women from openly dealing with this problem. The number of unreported cases in female diabetic patients with sexual problems is considerably higher than among men. Therefore the same applies here: addressing the problem is the first step towards a solution and regaining a full sex life.

Besides the causes shared with men, and in particular hormone deficiency (oestrogen) during menopause and afterwards, the following are mainly responsible for sexual reluctance in female diabetic patients:

- ✓ the effects of high blood glucose levels, and
- ✓ damage to nerves and blood vessels

Fluctuations in blood glucose and excessively high glucose levels can dry out the mucous membranes of the vagina to such an extent that pain is experienced during sexual intercourse. Damage to nerves in the genital area and a lack of blood circulation can greatly reduce sexual desire and thus enjoyment of sex. Frequent fungal infections in the vagina or urinary tract infections cause additional problems for these female patients.

Escaping the frustration of libido loss



In treating a lack of libido, in addition to near-normal blood glucose control, your doctor will clarify a possible hormone disorder – either in connection with diabetes or diseases of the thyroid or pituitary gland.² Furthermore, changes in lifestyle and psychological support are useful, as with male diabetes patients.

Your doctor will give you appropriate recommendations. Application of lubricating creams and moisturising ointments is an optional supplement for female diabetic patients.

Being sexually active without fear of hypoglycaemia

Sex consumes calories, similar to sports. It is therefore important to keep an eye on your blood glucose levels.

You should therefore:

- ✓ check your blood glucose regularly to make sure it is not too low before sex.
- ✓ eat something before and after sexual intercourse depending on blood glucose level
- ✓ have a snack before going to sleep depending on your blood glucose level

References

- 1 Malavige LS, Levy JC: Erectile dysfunction in diabetes mellitus. J Sex Med 2009; 5(9): 1232–47.
- 2 Hien P, Böhm P: Diabetes-Handbuch. Eine Anleitung für Praxis und Klinik. Springer. 2010; p. 111–112, p. 223–225.
- 3 Copeland KL, Brown JS, Creasman JM et al.: Diabetes mellitus and sexual function in middle-aged and older women. Obstetrics & Gynecology. 2012; 120(2): 331–40.

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SUMMARY

A satisfying and fulfilling sex life contributes significantly to good health status and mental stability. One's love life should therefore not needlessly suffer due to diabetes! Medical or psychological help can help one return to normal sexual activity, and this applies to both men and women. Take the first step and arrange for an appointment with your doctor or practice team.