

DIABETES AND ERECTILE DYSFUNCTION (ED)

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LET'S TALK ABOUT IT, IT'S URGENT...

In 2016, diabetes affects nearly 189 million people worldwide. *Diabète Québec* has estimated the **number of people living with diabetes at 830 000**, which is nearly 9% of the adult population. This percentage is double among the Quebec First Nations.



Among the complications of diabetes, erectile disorders are often overlooked even though they genuinely reduce quality of life.

After 40 years of age, nearly one in three men suffers from these problems.

Diabetes is the leading diagnosed cause of erectile dysfunction.

Its prevalence increases with:

- Age;
- The duration of the diabetes;
- The severity of the diabetes, particularly when poorly controlled.

Connections between diabetes and ED

Vascular aspect

The arteries that supply the penis are obstructed thereby hindering the erection which requires blood flow.

Neurological aspect

"The erection is a reflex process." In the case of diabetic neuropathy, it is clear that an alteration of the nervous system can affect the neurological control required for an erection.

Who are most affected by ED?

- 78% of those diagnosed with diabetes for over 10 years;
- 77% of those with poorly controlled diabetes compared to 64% of those with controlled diabetes;
- Nearly 85% of patients when other complications of diabetes are already present.



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ERECTILE DYSFUNCTION (ED) 1 OUT OF EVERY 3 DIABETICS...



The occurrence of these disorders can be an important alert factor for the physician. They can reveal the early stages of a vascular disease and the development of a coronary heart disease.

Since coronary heart disease is largely preventable, it is important to actively screen the symptoms of the dysfunction and identify high risk men who require a complete cardiovascular and metabolic examination.

58% of type 2 diabetic men suffering from ED are at risk of heart attack or even death.

PREVENTING THE BREAKDOWN...

Prevention through the proper control of diabetes can prevent the occurrence of erectile dysfunction.

- Modifying one's lifestyle through healthier nutrition and physical activity.
- Controlling blood sugar levels and anti-diabetic treatments.



These tips will also have a positive impact on all other complications of diabetes, which are sometimes serious, such as cardiovascular disease, eye, nerve and kidney problems, amputation, etc.



The psychological dimension must not be underestimated.

Often the breakdown occurs after several months of abstinence during which erectile function has gradually deteriorated. The more the patient retreats into silence, the more self-confidence he loses. Taking early action helps to avoid the **vicious circle of failure**, since the fear of failure can become the reason for the erectile dysfunction. The management of erectile dysfunction problems therefore concerns the partner and the couple as a whole.



Finally, erectile disorders are a real nuisance to quality of life and their treatment should be an integral part of the treatment of the diabetic patient. Effective solutions and drug or surgical treatments exist.

Do not hesitate to discuss the matter with your diabetes nurse or physician.

FOR MORE INFORMATION:

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