



DOCTOR DISCUSSION GUIDE

Managing Erectile Dysfunction

Erectile dysfunction is a treatable condition, but it's one that can be tough to talk about. Asking the right questions during your conversation will help you know what to expect and how to better navigate your condition. Familiarize yourself with these common terms before your appointment to help facilitate your discussion.

Vocabulary to Know

Your doctor might mention these common terms. Here's what they mean.

Organic Erectile Dysfunction	Occurs when there is a biological or pharmaceutical reason why a man cannot get or maintain an erection. As many as 80 percent of ED cases have an organic component.
Psychogenic Erectile Dysfunction	Occurs when a man has difficulty getting or maintaining a erection for psychological reasons. Psychological factors can also complicate organic ED.
Premature Ejaculation	Occurs when a man ejaculates before he desires to, often before penetration or soon after penetration.
Phosphodiesterase Type 5 Inhibitors (PDE5-I)	Oral medications used to treat erectile dysfunction. There are several of these drugs including Viagra, Cialis, and Levitra.
Peyronie's Disease	A condition where scarring inside the penis causes it to curve or bend during an erection. This can be quite painful and make erections difficult or impossible.
Retrograde Ejaculation	When the ejaculate flows backwards into the bladder instead of coming out of the penis.
Nocturnal Erection	An erection that occurs while a man is asleep. If you get nocturnal erections, it can be used to rule out certain biological causes of erectile dysfunction.
Atherosclerosis	Or hardening of the arteries, a common cause of erectile dysfunction. It is usually due to a buildup of fat in the walls of the arteries.
Penile Injection	A type of treatment for erectile dysfunction that increases blood flow to the penis and helps to establish an erection.



Questions to Ask

These questions will help you start a conversation with your doctor about how to best manage erectile dysfunction.

About Symptoms

- Why is my erection curved?
- What does it mean that I can get hard enough to penetrate my partner but then lose my erection?
- It's painful to get an erection, can you help?
- I get turned on during sex, but my erection is no longer hard enough for intercourse. What should I do?
- It feels like I'm ejaculating when I orgasm, but nothing comes out of my penis. What does that mean?

About Causes & Risk Factors

- Could my medication be affecting my erectile function?
- I have a chronic diseases (i.e. diabetes, high blood pressure, kidney disease). Do you think it could be causing my ED?
- Could smoking or alcohol be affecting my ED?
- Are there lifestyle changes I can make that could affect my ED?
- I've been feeling really stressed lately. How could my mental health be related to my erectile problems?

About Diagnosis

- What could be causing my erectile dysfunction?
- Are there tests that you can do to see if I have an underlying health problem causing my ED?
- Is my ED mild, moderate, or severe?

About Treatment

- Do you think my ED could be treated with a PDE-5 inhibitor?
- Would changing some of my other medications affect my ED?



About Treatment (continued)

- Are there general behavioral changes I can make or changes to my health routine that could improve my ED?
- Do you think that something like a vacuum pump would help me?
- Do you think I'm a good candidate for a penile implant?
- Would penile injections make sense for me?
- Would therapy for my anxiety help with my erectile dysfunction?
- Do you think I should see a sex therapist?

About Coping

- Should I talk to my partner about my ED?
- How* should I talk to my partner about my ED?
- What's the best way to take my ED treatment in order to minimize the interruption to my sex life?
- Are there support groups that you can recommend for people with ED?
- Would it be helpful to talk about my ED with a therapist? If so, can you recommend one?
