

My Diabetes



My Diabetes Project – Diabetes information and services in Europe for women and their families is coordinated by:

European Institute of Women's Health

www.eurohealth.ie

Sex

One potential outcome of diabetes is nerve damage, which can affect your sexual function.

The type of nerve that controls our sexual responses, are called automatic nerves and they control all our other internal organs that carry out involuntary functions (so we don't think about digesting food or circulating blood – they just happen).

When we are sexually aroused, automatic nerve signals increase blood flow to the genitals and cause smooth muscle tissue to relax. If there is any damage to these nerves, normal function can be limited. Damaged blood vessels can reduce blood flow, adding to sexual dysfunction.

Men and women can experience different sexual problems.

Men:

- Erectile Dysfunction — unable to have an erection firm enough to have sexual intercourse, and men with diabetes are 2-3 times more likely to have erectile dysfunction than men who don't.

- Causes of erectile dysfunction also include high blood pressure, kidney disease, alcohol abuse, blood vessel disease, certain medications, psychological factors, smoking, and hormonal deficiencies (some of which are consequences of or comorbidities with diabetes).
- For some men, erectile dysfunction is the first warning sign that they may have diabetes. Men should talk to their health care providers to try and determine the cause and an appropriate treatment. Depending on the cause, treatments could include oral pills, a vacuum pump, pellets placed in the urethra, shots into the penis, surgery, counseling, or surgery.
- Retrograde Ejaculation — this occurs when part or all of a man's semen goes into the bladder, and not out of the penis tip. When he ejaculates. Internal muscles, called sphincters, are not working normally, causing the semen to enter the bladder. It then mixes with urine and leaves the body during urination, which doesn't harm the bladder. However, men will notice that little semen is discharged during ejaculation and could potentially have fertility problems. This is usually caused by poor blood glucose control, but prostate surgery and some medications could be to blame as well. It is sometimes helped by medication that strengthens the sphincter (an internal muscle) in the bladder. A urologist (a doctor specialized in urinary tract systems and male reproductive system) or fertility specialist can help with any fertility issues arising from retrograde ejaculation.

Women:

- Sexual problems for women can include:
- decreased vaginal lubrication, resulting in vaginal dryness;
- uncomfortable or painful sexual intercourse;
- decreased or no desire for sexual activity;
- decreased or absent sexual response.
- These are typically caused by nerve damage,
- reduced blood flow to the genital and vaginal tissues,
- hormonal changes,
- medications,
- alcohol abuse,
- smoking,
- psychological problems like anxiety or depression,

- gynecologic infections,
 - other diseases, or conditions relating to pregnancy and menopause.
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- Women experiencing any of these problems should meet with their health care provider, who can conduct a physical exam and lab tests that will point to the cause(s) of their sexual problems.
 - Once the cause is determined, the doctor can recommend treatment, including: prescription or over-the-counter vaginal lubricants; change in position or stimulation during sexual relations; counseling, Kegel exercises; and potentially drug treatments.