



ERECTILE DISORDER by Arlen Keith Leight, Ph.D.

You cannot pick up a magazine or watch a television show today without some advertisement for so-called E.D. treatment. Erectile disorder is often called erectile dysfunction or impotence and is the most common sexual disorder for men. The terms dysfunction and impotence inadvertently and often inaccurately contribute to a man's feeling powerless over his erection. As with most sexual disorders, the inability to attain or maintain an erection or complete erection may result from biological and/or psychological causes. A medical evaluation is the critical first step. Low levels of testosterone, a natural part of aging, can contribute to issues with libido as well as erection problems. Testosterone supplementation is often sufficient to care for E.D, not to mention the benefits of increased energy and improved mood. Drugs, medication and alcohol are very frequently the cause of erectile challenges. Reducing or eliminating drugs and alcohol may be the solution. Ask your physician if any of the medications you are taking can contribute to erectile issues. These may include high blood pressure medications and anti-depressants. Often there are other medications available that can be substituted without the same sexual side effects. Diseases such as diabetes and coronary artery disease are also associated with erectile disorder.

Viagra, Cialis and Levitra can be effective medications for Erectile Disorder of physical origin. Other treatments including penile implants and injections into the penis are also available for E.D. originating from medically related conditions. Vacuum aspirators (pumps) and venous retention rings (cock rings) offer varying degrees of success for E.D. as well. I tend to recommend trying a cock ring as a simple first choice for E.D. or for increasing firmness of erections.

While there are multiple physical reasons for erectile disorder, the primary cause is performance anxiety, not uncommonly related to lack of erotic desire for one's partner. Viagra, Cialis and Levitra are not aphrodisiacs, and they do not produce desire. Trying to overcome desire challenges with one of these medications will not work. Lack of desire for one's partner is the primary reason couples seek the help of a clinical sexologist.

When the underlying cause of E.D. is psychological, a cognitive-behavioral sex therapy approach works best. E.D. can be rapidly cured by using the mind to redirect the focus of attention during sex. While a man who ejaculates prematurely does well to direct his focus away from the object of erotic desire, a man who has difficulty achieving erection or ejaculation does well to direct his focus toward the object of erotic desire.

Performance anxiety is essentially a misdirected focus of attention on matters other than an object of sexual desire. When you are concerned about your ability to satisfy your partner or you are self-conscious about your body, or your mind is thinking about some problem at work, you are not focused on the sexual stimulus—the partner or fantasy in your mind. Similarly, when you move out of the moment of sexual connection and pleasure you are no longer focused on the sexual stimulus. Redirection is necessary in order to be sexual. One of the most enjoyable aspects of sex is losing yourself in the moment with your partner. Worry, anxiety, concern and fear take you out of the here-and-now of sexual experience.

Diagnosing and treating sexual problems is best accomplished by licensed health professionals. Working with your physician and (sex) therapist or clinical sexologist, your diagnosis and treatment can be most effectively accomplished. Because sexual challenges are multifaceted and may include medical, biological, psychological, and/or social factors, they may not be a simple matter to address. Taking matters into your own hands may or may not work for you!

Having challenges in your sex life with your partner? Consider Confidence, Self-Esteem and Personal Empowerment