



Education

Diabetes and Midlife Sexuality

How are diabetes and sexuality related?

Diabetes may affect the sexual function of both men and women. People with diabetes tend to have problems with sexual function earlier in life than people who do not have the disease.

How much diabetes affects sexual function may depend on how severe the disease is and how old you are when the disease begins. Men diagnosed after age 40 may have more mental and emotional adjustments to make than those who learned to live with diabetes at a younger age.

How does diabetes affect sexual function?

Diabetes can affect all aspects of your health, including your physical and psychological health. In general, men and women with diabetes are more likely to have bouts of decreased feelings of sexuality and less interest in sex. This is especially likely when the diabetes is not in good control.

Diabetes in men can lead to hardening and narrowing of the blood vessels that supply the erectile tissue of the penis. This spongy tissue swells and stiffens the penis during an erection. Decreased blood flow to the penis may cause erectile problems. Many men who have diabetes have a problem with erectile dysfunction, also called impotence or ED. ED is trouble having and keeping an erection. In fact, ED, along with the need to urinate and drink often, may be an early sign of diabetes. ED occurs in men with either type 1 or type 2 diabetes.

Changes may more be subtle in women with diabetes. In women, diabetes can lead to hardening of the blood vessels of the vaginal wall. Decreased blood flow caused by diabetes may cause the vagina to be drier than normal. It also may cause a woman to be at a higher risk of getting recurring yeast infections. All of these changes can cause pain during sex.

In older women, the combination of diabetes and menopause may cause:

- a 50% decrease in vaginal blood supply due to low estrogen levels
- vaginal secretions that are less acidic and less protective, which lowers the resistance to bacteria in the vagina and increases the risk of yeast infection
- levels of glucose in vaginal mucus that may help cause yeast infections
- pain and bleeding with intercourse because of vaginal dryness and the thinning of the vaginal lining.

Women may notice that they are not as easily aroused. They may be less sensitive to touching and stroking, which can result in decreased interest in sex. It may become harder for a woman to have an orgasm.

How is sexual dysfunction treated?

Treatment for a menopausal, diabetic woman may include estrogen hormone therapy, which helps keep blood flowing in vaginal tissues. Estrogen also provides an acid level adequate to protect against vaginal infections in women past menopause. Hormone therapy does pose some risks. Discuss the risks and benefits with your health care provider.

If a diabetic woman is having pain with intercourse, other treatments may include:

- treatment for any vaginal infections
 - use of lubricants such as KY jelly (petroleum jelly should not be used).
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Treatment for the older, diabetic man may include:

- having intercourse only when well rested (early morning hours may be better because testosterone levels are higher then)
- taking a medicine such as Viagra, Levitra, or Cialis, as prescribed by the health care provider, to make it easier to have and keep an erection
- injecting medicine into the penis to produce erections
- using a vacuum device and tight band to draw the blood into the penis and constrict blood flow so an erection can be maintained long enough to have intercourse
- using an implanted penile device to allow erections
- taking the hormone testosterone.

Diet and medicine to regulate blood sugar levels are very important to control diabetes and prevent more problems. The more closely your diabetes is controlled and treated, the less severe the problems, including those that affect sexual function.

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