Peyronie’s Disease and Erectile Dysfunction

**Peyronie’s disease** (PD), a condition marked by plaques that form just below the skin of the penis, can affect men in different ways. The most notable symptom is curvature of the penis, but men may also have pain or penile shortening. Psychological and emotional issues are also common, especially if the man is unable to have intercourse.

**Erectile dysfunction** (ED) is another common problem for men with PD. Studies have shown that between 22% to 54% of men with PD also have problems getting an erection firm enough for sex. (The wide range is due to the variety of ED definitions and criteria used by researchers.)

Unfortunately, scientists aren’t sure why so many men with PD also have ED. It’s also difficult to assess given the many factors that affect erectile function, such as aging and comorbid conditions like diabetes and heart disease.

Last month, the International Journal of Impotence Research published a study that examined whether the degree of curvature and the direction of the curve had any role in vasculogenic ED in men with PD. Good blood flow to the penis is essential for a firm erection.

Researchers from the United States and Turkey evaluated 220 patients with a mean age of 55. All of the men had Peyronie’s disease.

After receiving an injection to induce an erection, each man underwent penile duplex Doppler ultrasonography (PDDU), a test that assesses blood flow. PDDU may also be used to assess other aspects of PD, such as the size and depth of plaques and the development of calcification.

About 36% of the men self-reported ED. But after analyzing PDDU results, the researchers found that almost 70% met the criteria for vasculogenic ED.

Sixty-eight percent of the men had comorbidities that could contribute to ED. For example, about a quarter of the men had hypertension. Eight percent had diabetes and 8% had coronary artery disease.

There were no significant differences in the degree of curvature, however. Nor did the direction of the curve appear to impact the type of ED.

“There is no role of PD in the development of ED remains unclear at the present time,” the authors wrote.
The also explained the past studies have shown higher rates of comorbid conditions in men with PD who also have ED.

“This suggests that PD-associated ED may be a better reflection of underlying comorbid status rather than the disease itself,” they explained.

But even though we still don’t have a solid explanation for ED in men with PD, we can still help our patients.

Treatment for comorbidities, lifestyle changes, or counseling for relationship problems can benefit men struggling with both conditions. There are also many treatment options for men with ED, which may be appropriate for our patients. A man’s urologist can give advice on his specific situation.

In the meantime, it’s helpful for us as clinicians to understand both Peyronie’s disease and erectile dysfunction. For more information, we encourage you to click on the following links:

Peyronie’s Disease
Erectile Dysfunction

Resources

International Journal of Impotence Research


“The direction and severity of penile curvature does not have an impact on concomitant vasculogenic erectile dysfunction in patients with Peyronie's disease”

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http://www.nature.com/ijir/journal/vaop/ncurrent/abs/ijir201425a.html