Understanding Diabetic Neuropathy and Erectile Dysfunction

Diabetes and erectile dysfunction (ED) are often connected. When compared to men without the disease, diabetic men are almost four times more likely to have ED. They also tend to develop it ten to fifteen years earlier and have more severe cases.

How does diabetes lead to ED? High blood sugar can reduce blood flow to the penis, through atherosclerosis, interference with chemical processes, and damage to erectile tissues.

Autonomic neuropathy (nerve damage) from diabetes can also contribute to ED. Normally, when a man is sexually stimulated, nerve signals travel between the penis and brain that trigger an erection. If a man has neuropathy, these nerve signals can't travel properly. The result is a weak erection or no erection at all.

Recently, scientists discovered that peripheral neuropathy – usually found in the hands and feet – is associated with higher rates of ED and lower urinary tract symptoms (LUTS) like nocturia and greater urinary urgency.

Their findings were presented in September at the European Association for the Study of Diabetes 2014 meeting by lead researcher Dr. Rodica Pop-Busui of the University of Michigan Health System.

Dr. Pop-Busui’s team analyzed data from 635 men, all participants in the Diabetes Control and Complications Trial/Epidemiology of Diabetes Interventions and Complications (DCCT/EDIC) study, which lasted many years.

At the time of the study, the men’s mean age was 52. They had been diabetic for an average of 30 years.

Neuropathy data was collected during the 13th and 14th year of the EDIC study. During year 17, ED and LUTS were assessed.

At that time, the researchers found higher rates of ED and LUTS among the men who had had peripheral neuropathy at year 13:
After adjusting for factors like age, blood pressure, and smoking/drinking status, men with peripheral neuropathy were almost 4 times more likely to have both ED and LUTS.

What can clinicians do?

If you work with diabetic men, encourage them to keep their blood sugar under control. Help them make good choices in diet and exercise. Be sure that they are checking their blood sugar levels regularly and taking medications properly. Answer any questions they may have or make appropriate referrals.

You can also try to find out if they have any signs of erectile dysfunction. While the topic may be awkward to bring up, you can “soften” it by saying, “Many men with diabetes have trouble getting or keeping erections. Has this been a problem for you?” If sexual health isn’t your area of expertise, refer them to another clinician who can help.

These links provide more information about diabetes and men’s sexual health:

[Treating Diabetes: Talking About Sex?](#)

[Diabetes – Erectile Dysfunction](#)

[How is Diabetes Affecting Your Sexual Health?](#)

[Treating Diabetes and ED](#)

**Resources**

[American Diabetes Association](#)

“Peripheral Neuropathy”

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EASD Virtual Meeting

Pop-Busui, Rodica, et al.

“Diabetic neuropathy and urological complications in men with type 1 diabetes in the DCCT/EDIC study”

(Abstract #127. Presented at the European Society for the Study of Diabetes 2014 meeting. September 17, 2014)

http://www.easdvirtualmeeting.org/resources/16981

Medscape Medical News

Tucker, Miriam E.

“Diabetic Neuropathy Ups Erectile Dysfunction, Urinary Problems”

(September 17, 2014)


Sexual Medicine Society of North America

“Diabetes – Erectile Dysfunction”

http://www.sexhealthmatters.org/erectile-dysfunction/diabetes-erectile-dysfunction/single

“How is Diabetes Affecting Your Sexual Health?”

http://www.sexhealthmatters.org/sex-health-blog/how-is-diabetes-affecting-your-sexual-health