

# SEXUALITY: How little pills can be a big boost for sex lives

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**POTENT AID:** Modern medicine can help you to retain the sexual vigour of your youth. Picture: STOCKXPRT

**WELCOME** to the new sexual marketplace where hope, sexual function, health and satisfaction in a variety of forms and packages are for sale. This marketplace began to open its doors at the same time as the growing trend began to defy ageing.

Conveniently, a consumer culture began to make you aware that as you age, you can make choices about your appearance and behaviour.

The main message is that your sexuality is in your hands. No longer do you have to retire from an active sex life, as your mother and father may have done, due to the lack of sexual pharmaceuticals that are now an option for ageing people.

Today celibacy is the new pathology. To be growing older includes a certain pressure to be sexual. And there's lots to help you retain the sexual pleasure as part of ageing well.

Ageing is not for the tender hearted. We are often surprised when we see ourselves in the mirror. We are deeply unprepared for this physical transformation that naturally occurs within the norms of the developmental phase of the last third of our lives.

The media present us with relentless images of all the earlier developmental phases of our lives: from pictures of cute babies, to teenagers, young men and women in their prime living the aspirational life; pregnant glowing moms; new parents with beautiful babies who don't mess; moms in cars taking children to school before going to the gym (or to meet a lover); career-driven men and women looking serious in advertisements marketing laptops and mobiles. Then there's a hiatus — followed by mostly silver-haired men and women smiling outside their retirement villages that also have a special frail care facility.

How are we supposed to look and behave in between and after age 50?

Sexuality has never been high on the agenda for an ageing population. Due to chronic diseases and unhealthy lifestyles, sheer boredom, or depression, plus a lack of relationship choices, many people have opted for celibacy in accordance with societal prejudice against ageing, and specifically ageing and sexuality. The images we hold in our heads as we age are too often of years of illness, poverty, loneliness and then death.

Yet in this parallel development of sexual pharmaceuticals and the trend to defy ageing, some magic has been happening.

It's relatively easy these days to buy elements of a lifestyle of youthfulness: a hairdresser to colour out your grey, an exercise coach to tone your ageing muscles and give you back a waist depleted by the loss of vital hormones, a financial expert for advice on retirement, and cosmetic surgery to give you minimally invasive procedures with maximum results and little down time.

The marketplace has capitalised on one of our greatest fears: growing and looking old.

Dr Merryn Gott is a senior lecturer at Sheffield Institute for Studies on Ageing . She has developed extensive research programmes related to sexuality and ageing. In her latest book *Sexuality, Sexual health and Ageing* (Open University Press) she says that today appearing old represents failure, and becoming asexual and sexually dysfunctional is a sure giveaway of ageing.

And this is where the magic of sexual pharmaceuticals, among them the drug, sildenafil, makes its presence felt.

These drugs allow men to look youthful, and to continue to perform sexually. This gives them one of the greatest gifts they could wish for: ongoing potency.

Going it alone is dangerous: by 2010, sales of counterfeit medicines are projected to total 50bn worldwide. So said Prof John Dean, a UK-based sexual medicine consultant, at an address delivered at the International Consultation on Sexual Medicine in Paris early this year.

It is clear that you need to be aware of what you are buying in this new sexual market place. One essential, even life-saving tip in this country is to use only medications that have been clinically tested and approved by the Medical Controls Council. And you should do so only after a comprehensive medical and sexual history taken by a specialist, and a diagnosis made on the basis of that assessment.

A study in the *Journal of Sexual Medicine* in 2008 looked at the sexual satisfaction of patients with erectile dysfunction (ED) who were treated with counseling, the drug sildenafil (one of a class of drugs known as PDE5Is), or both. The researchers concluded that the best treatment was sildenafil with counseling.

But you also need to be aware of the pitfalls of medicalising your sexuality. The availability of these drugs should not coerce you out of chosen celibacy or add pressure to remain looking youthful.

A drug, pill, potion or lotion is never fully effective without a solid relationship, and a proper assessment of sexual and physical health.

Too many boxes of PDE5Is lie hidden in the cupboards of men with ED due to the awkwardness of raising the topic after years of problems.

It helps to know that while ageing slows down erectile stability, it does not cause ED.

ED results primarily from atherosclerosis of the penis. This happens when the epithelium becomes diseased due to lack of blood flow to the penis. This is caused primarily by cardiovascular diseases, which is why doctors now say that ED is one of the major markers for heart disease.

ED can also be caused by depression, chronic diseases such as diabetes, and medications, most significantly the class of drugs known as SSRIs that are commonly used to treat depression.

There are three PDE5I drug products available on the market. When used in appropriate and carefully selected patients, all help to treat ED in men, and all have different mechanisms of action. Depending on your lifestyle, individual needs, medical conditions you may have, and other medication you may be taking, a doctor should decide whether it is safe for you to be on the drugs at all, as well as which suits you best.

As yet, in SA, there is no clinically approved drug available to treat female sexual dysfunction. PDE5Is are contra-indicated for women, but are being prescribed off-label. The drugs have been shown to be helpful in sub-groups of women, in particular post-menopausal women with sexual dysfunction.

A study in *Psychiatric Services* in 1999 and a smaller study in the journal, *Drugs*, has shown PDE5Is to be effective in women with genital arousal disorder and Type 1 diabetes.

One of the many decisions women and men have to make as they age, is whether to opt for hormone replenishment — hormone replacement therapy. Loss of libido is a common side effect of loss of oestrogen, progesterone and testosterone in women, and loss of testosterone in men. Replacing these hormones can go a long way to restoring healthy sexual functioning in both men and women.

The reality is that sexual pharmaceuticals have revolutionised ageing, and they provide people with a choice to continue being sexual throughout their lives. However, shopping for these pharmaceuticals needs to be done wisely, and under specialist supervision.

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