

Erectile dysfunction (ED) occurs when a man has consistent and repeated problems sustaining an erection. Without treatment, ED can make sexual intercourse difficult. The problem is reported by 1 in 5 men and that number increases with age.

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There are several forms of male sexual dysfunction, including poor libido and problems with ejaculation. But ED refers specifically to problems achieving or maintaining an erection. Men with ED often have a healthy libido, yet the body fails to respond. In most cases, there is a physical basis for the problem [read more>>](#)

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Symptoms of ED

Symptoms of ED include:

- Erections that are too soft for sexual intercourse.
- Erections that are too brief for sexual intercourse.
- An inability to achieve erections.

Men who cannot get or maintain an erection that lasts long enough or is rigid enough to complete sexual intercourse is considered to have erectile dysfunction.

Sexual dysfunction and ED become more common as men age. The percentage of complete ED increases from 5% to 15% as age increases from 40 to 70 years. But this does not mean growing older is the end of your sex life. ED can be treated at any age. Also, ED may be more common in Hispanic men and in those with a history of diabetes, obesity, smoking, and hypertension. Research shows that African-American men sought medical care for ED twice the rate of other racial groups.

The Mechanics of ED An erection occurs when blood fills two chambers known as the corpora cavernosa. This causes the penis to expand and stiffen, much like a balloon as it is filled with air. The process is triggered by impulses from the brain and genital nerves. Anything that blocks these impulses or restricts blood flow to the penis can result in ED.

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The link between chronic disease and ED is most striking for diabetes. Men who have diabetes are two to three times more likely to have erectile dysfunction than men who do not have diabetes. Among men with erectile dysfunction, those with diabetes may experience the problem as much as 10 to 15 years earlier than men without diabetes. Yet evidence shows that good blood sugar control can minimize this risk. Other conditions that may cause ED include cardiovascular disease, atherosclerosis (hardening of the arteries), kidney disease, and multiple sclerosis. These illnesses can impair blood flow or nerve impulses throughout the body.

S2 Inhalant and timolol ophthalmic © 2019 Lifestyle choices that impair blood circulation can contribute to ED. Smoking, excessive drinking, and drug abuse may damage the blood vessels and reduce blood flow to the penis. Smoking makes men with atherosclerosis particularly vulnerable to ED. Being overweight and getting too little exercise also contribute to ED. Studies indicate that men who exercise regularly have a lower risk of ED.