

**OBJECTIVE**

Alberta clinicians understand the investigation and management of erectile dysfunction, are aware of indicators for referral and the importance of counselling.

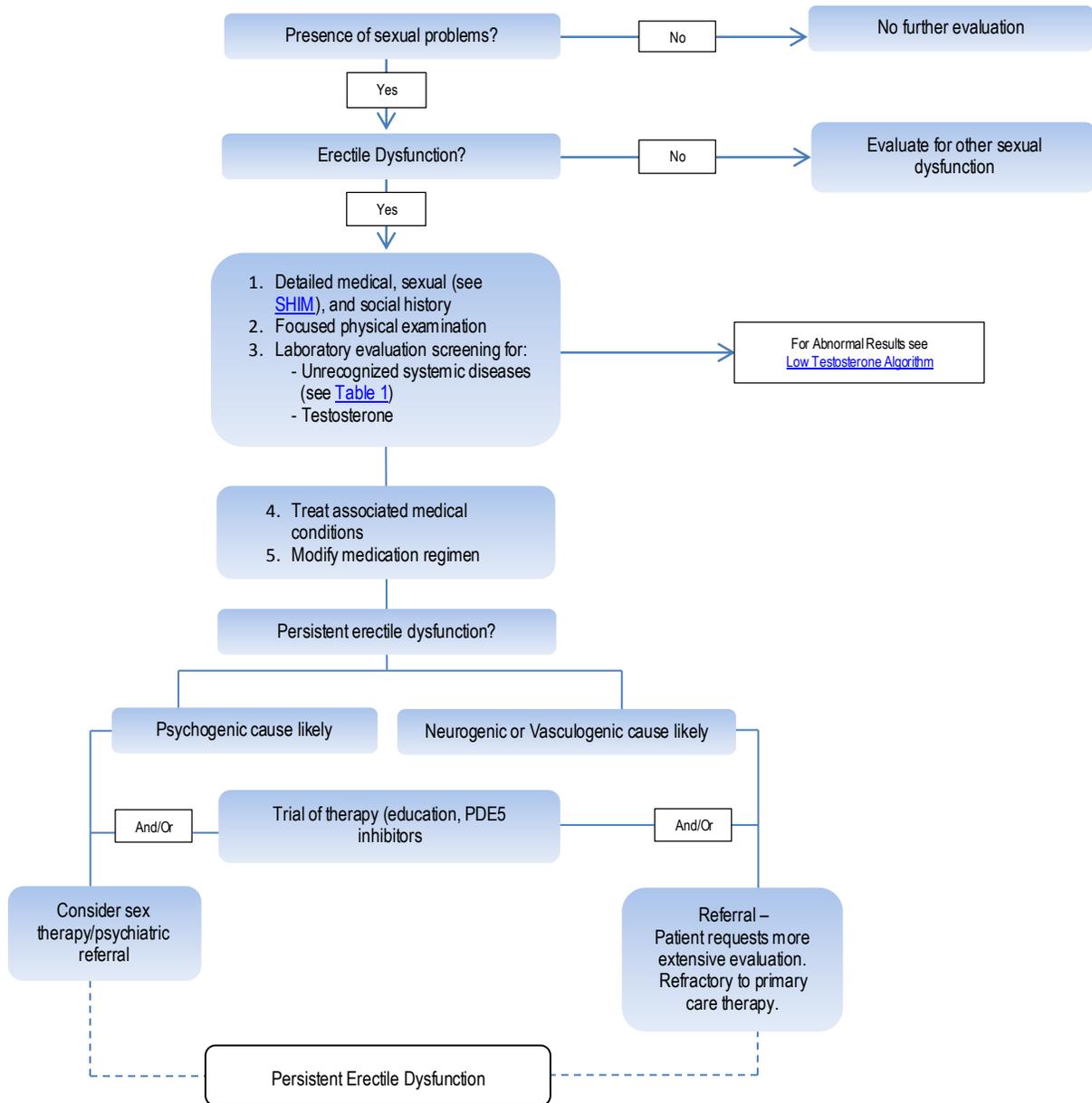
**TARGET POPULATION**

- Men who are unable to have or sustain an erection adequate for satisfactory sexual activity for at least three months
- Men who have symptoms of decreased sexual desire and/or erectile dysfunction

**EXCLUSIONS**

- Patients with other forms of sexual dysfunction (i.e., premature ejaculation)

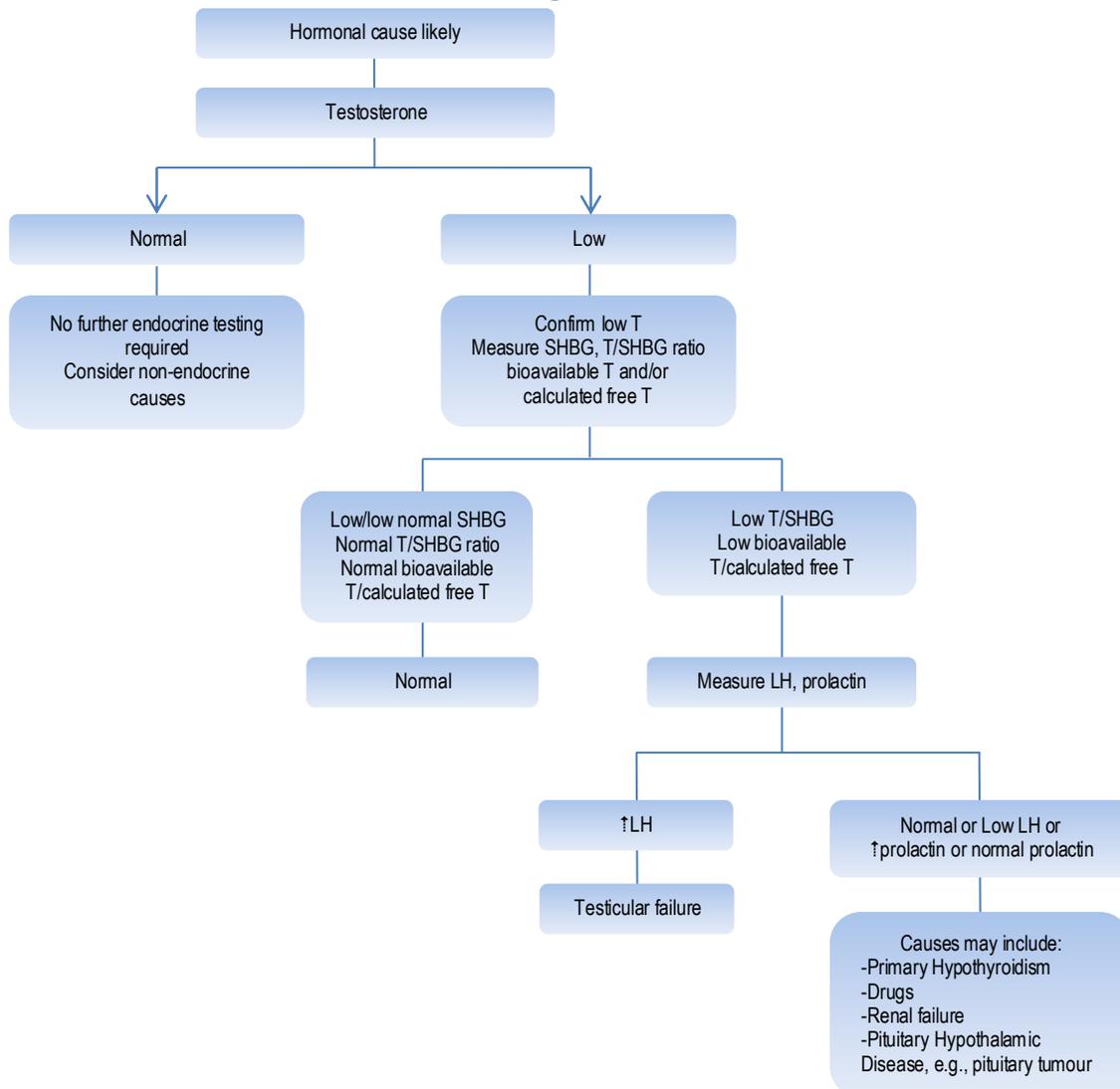
**Erectile Dysfunction Algorithm**



Medications Linked to ED	
Drug Class	Agents
Diuretic	Thiazides, spironolactone
Antihypertensive drugs	Calcium-channel blockers, beta-blockers, methyldopa, clonidine, reserpine, guanethidine
Cardiac or cholesterol drugs	Digoxin, gemfibrozil, clofibrate
Antidepressants	Selective serotonin-reuptake inhibitors, tricyclic antidepressants, lithium, monoamine oxidase inhibitors
Tranquilizers	Butyrophenones, phenothiazines
H <sub>2</sub> antagonists	Ranitidine, cimetidine
Hormones	Progesterone, estrogens, corticosteroids, lutenizing hormone-releasing hormone agonists, 5 $\alpha$ -reductase inhibitors, cyproterone acetate
Cytotoxic agents	Methotrexate
Immunomodulators	Interferon $\alpha$
Anticholinergic agents	Disopyramide, anticonvulsants
Recreational drugs	Alcohol, cocaine

Table 1: Medications Linked to ED

### Low Testosterone Algorithm



**Sexual Health Interview for Men (SHIM)**

To administer the Sexual Health Inventory for Men (SHIM), patients answer each of the questions in the SHIM scale from 0 to 5, where “0” indicates not activity, “1” is the most negative response, and “5” is the most positive response. Overall, scores on the SHIM range from 1 to 25. Higher scores indicate better erectile function, with a score of 20 or higher indicating a normal degree of erectile functioning. Low scores (10 or less) indicate moderate to severe erectile dysfunction. The scale can be given at the initial visit or follow-up visits as a means to facilitate patient-physician communication about erectile function or sexual satisfaction.

1. How do you rate your confidence that you could get an erection?		Very Low 1	Low 2	Moderate 3	High 4	Very High 5
2. When you had erections with sexual stimulation, how often were your erections hard enough for penetration?	No sexual activity 0	Almost never/never 1	A few times 2	Sometimes 3	Most times 4	Almost always/always 5
3. During sexual intercourse, how often were you able to maintain your erection after you had penetrated (entered) your partner?	Did not attempt 0	Almost never/never 1	A few times 2	Sometimes 3	Most times 4	Almost always/always 5
4. During sexual intercourse, how difficult was it to maintain your erection to completion of intercourse?	Did not attempt 0	Extremely difficult 1	Very difficult 2	Difficult 3	Slightly difficult 4	Not difficult 5
5. When you attempted sexual intercourse, how often was it satisfactory to you?	Did not attempt 0	Almost never/never 1	A few times 3	Sometimes 4	Most times 5	Almost always/always 5

ED is an issue that impacts relationships:

- Have you discussed your ED issues and concerns with your partner?
- Is your partner willing to attend appointments with health care professionals with you to learn more about this problem?