

‘Who’s the Expert...?’

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Last week my office was attended by a young couple (17 years of age) who complained of sexual difficulties. I found myself sitting across the desk from a shy teenage boy and his girlfriend of two months. “I have ED” was his introductory comment. After my initial shock, we settled into a discussion about their sex life and related concerns. As you may have guessed, his erectile dysfunction (ED) was secondary to his premature ejaculation and education was all that was needed.

As newer therapies are introduced for the treatment of ED, marketing pressures push patients into our offices. Thankfully, the teenage couple is the exception, but, unfortunately, the 50-year-old old couple is as well. Most men come to their doctor’s office without their partners.

With at least three more oral therapies in the immediate future, competition for patients will expand the market and provide physicians with new, undifferentiated patients who

are worried about their erectile activity. It will become more difficult to treat the penis in isolation, and health care providers will need to expand the scope of their knowledge to include all forms of sexual disorders, including an understanding of female sexual physiology. I am encouraged to see that some of the emphasis on education is being placed on couples’ issues and psychosocial issues that surround ED. This month, a number of papers, including a supplement to the present issue, address health issues that are associated with sexual difficulties.

Yesterday, I saw a woman in the office whose chief complaint was premature ejaculation. “You must be mistaken”, was my reply. “Women can’t suffer from premature ejaculation.” She replied, “Doctor, when you’ve been married to a man with this problem for 20 years, believe me, you suffer”. Hey, I thought I was the expert.