

Men's Sexual Health

A plain-English guide for you and your family

What you might feel

- Trouble getting or keeping an erection firm enough for sex
- Erection that starts but goes soft before finishing sex
- Lower interest in sex than before
- Trouble reaching orgasm or orgasm takes much longer
- Pain during sex or after ejaculation
- Ejaculation that happens too quickly (within 1–2 minutes of starting sex)
- Curved or bent penis that makes sex painful or impossible
- Morning erections disappear or become rare

What the care team will do

- Screen blood pressure, fasting glucose, and lipid panel (cholesterol) at every wellness visit
- Teach testicular self-exam monthly—roll each testicle gently between thumb and fingers feeling for hard lumps, size changes, or heaviness
- Verify safe use of phosphodiesterase-5 inhibitors (sildenafil, tadalafil) by checking medication list for nitrates and measuring baseline blood pressure
- Assess for signs of hypogonadism (low testosterone)—fatigue, low sex drive, loss of morning erections, decreased muscle mass, increased belly fat
- Screen all sexually active men under age 25 and those with new or multiple partners for gonorrhea and chlamydia with urine nucleic acid amplification test (NAAT)
- Educate that priapism (erection lasting over 4 hours) requires emergency department visit for aspiration (needle drainage) within 6 hours
- Counsel on condom use with every act—latex or polyurethane barrier placed before any genital contact, held at base during withdrawal
- Teach pelvic-floor exercises (Kegel)—squeeze muscles that stop urine flow for 5 seconds, relax 5 seconds, repeat 10 times three times daily

Where this information comes from

- American Urological Association (AUA) Guideline on Erectile Dysfunction 2018
- International Society for Sexual Medicine (ISSM)
- The Journal of Sexual Medicine
- UpToDate