

# Men's health services

## Toolkit

Pharmacy resources  
for you & your patients

### Using this toolkit

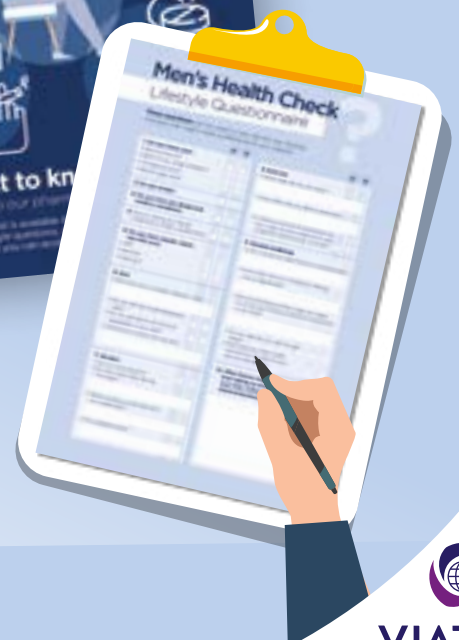
This toolkit has been designed to help you have proactive conversations with your male patients about their health and formulate ideas about how you can improve access to healthcare advice for men in your area.

With sildenafil 50mg for erectile dysfunction available over the counter (OTC), male patients may visit your pharmacy more frequently.

During supply consultations, you can use the opportunity to address other health queries or try to improve your patient's understanding of all the varied factors that may be contributing to their erection problems (EPs).

This toolkit contains a **poster** that can be displayed to encourage patients to ask you for health advice, while the booklet contains some supporting information for you.

It also includes an example **Health Check Lifestyle Questionnaire** that could be used or adapted to prompt discussions about healthy lifestyles and actions that can be taken to improve wellbeing.







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# Introduction to EPs



- Erection problems (EPs – also called erectile dysfunction or impotence) are common, particularly in men over 40 years of age.<sup>1</sup>
- EPs can be a result of many factors; patients may not realise that they can make lifestyle or other changes to help contribute to a reduction in EPs.
- Occasional occurrences are more likely to be caused by stress, tiredness or drinking too much alcohol
- More frequent occurrences are more likely to have underlying physical or psychological causes.
- Sudden, inconsistent occurrences (e.g. erections still occur in the morning) are likely to have a psychological cause.<sup>1,2</sup>

Physical factors:	Psychological factors:	Medicines:	Lifestyle factors:
 <p><b>Vasculogenic</b> (e.g. due to cardiovascular disease, hypertension, diabetes)</p> <p><b>Neurogenic</b> (e.g. Parkinson's disease, related to a stroke)</p> <p><b>Structural</b> (e.g. penile cancer or curve of the penis)</p> <p><b>Hormonal</b> (e.g. hypogonadism, low testosterone, hypothyroidism)</p>	 <ul style="list-style-type: none"> <li>• Issues with a partner/relationship</li> <li>• Performance anxiety</li> <li>• Stress</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Schizophrenia</li> <li>• Embarrassment</li> </ul>	 <p>Several medicines can cause EPs, including:</p> <ul style="list-style-type: none"> <li>• Antihypertensives such as beta-blockers</li> <li>• Diuretics</li> <li>• Antipsychotics</li> </ul>	 <ul style="list-style-type: none"> <li>• Smoking</li> <li>• Alcohol</li> <li>• Recreational drugs (e.g. cannabis, cocaine, anabolic steroids)</li> <li>• There is some evidence that cycling for more than 3 hours a week may contribute to EPs</li> </ul>

*When discussing EPs with your patients, you have an opportunity to identify potential lifestyle changes that they can make, or steps to control or identify any underlying conditions which may help improve their EPs. The list above is not exhaustive and there may be more than one underlying issue.<sup>3,4</sup>*

## Key lifestyle advice includes:

- **Lose weight** if they have a high body mass index (BMI)
- **Stop smoking**
- **Reduce alcohol** intake
- **Increase exercise** (unless it is cycling)
- **EPs can respond well to both treatment and lifestyle changes.**

# Lifestyle and EPs

## Weight management:

Obesity can be a risk factor for EPs, and one study found that weight loss for some men can lead to restored sexual function.<sup>5</sup>

**BMI = weight in kg/(height in m):<sup>2</sup>**



Bear in mind that **BMI does not take into consideration weight due to fat or muscle.** (E.g. very muscular men with low body fat may be classed as obese, or adults with excess fat when they age may be classed as a healthy weight).

Obesity can also contribute to diabetes, coronary heart disease, atherosclerosis and stroke, which are all potential causes of EPs.

Being a healthy weight may also help boost self-esteem and confidence, which in turn may improve any EPs.

### Pharmacy services:

- If you offer a weight loss service, men affected by EPs may be interested in finding out more if they have a high BMI.
- It is hard for people to lose weight and keep going without support as it takes time and commitment. If you don't offer a service, it might be useful to note where you can signpost a patient to, such as WW (formerly WeightWatchers) or the NHS 12-week weight loss plan.

## Alcohol intake:



Men are advised not to regularly drink more than 14 units a week. Units vary depending on the size and strength of the drink.<sup>7</sup>

**1 unit** = half pint of normal-strength lager/beer/cider (ABV 3.6%) or 25ml of spirits (ABV 40%)

**2 units** = 440ml can of high-strength lager/beer/cider (5.5% ABV)

**3 units** = Pint of higher-strength lager/beer/cider (ABV 5.2%) or large (250ml) glass of wine (ABV 12%)

If appropriate, offer and advise on how to cut down, such as:

- Have a few alcohol-free days a week
- Eat before or while drinking
- Use a tracking app
- Drink lower-strength drinks

## Exercise:

Exercise can help men improve their **mental wellbeing** and maintain a **healthy weight**. Exercise has been shown to be a **protective factor against EPs**, and exercising can lead to an improvement in men who are affected by vascular EPs.<sup>9</sup>

For men that cycle a lot, they can pause for a while to see if that has any effect.

## Smoking:

There is a **link between smoking and EPs**.<sup>6</sup> This may be due to the link between smoking and cardiovascular issues, or it might be that smoking affects the nitric oxide signal transduction pathway. Stopping smoking may help to improve EPs.



How do you currently support patients looking to stop smoking?

# Cardiovascular issues



EPs can be a symptom of an underlying condition, such as atherosclerosis or hypertension.

Beta-blockers or diuretics, which may be used by patients with cardiovascular conditions, can cause erection problems as a side effect.

Discussing EPs may be an opportunity to take an assessment of heart health. Helpful measurements include cholesterol levels and blood pressure. You may offer services to measure these in your pharmacy or offer home testing kits.

**NOTE: It is still important to advise all men buying sildenafil 50mg OTC for the first time to visit their GP within six months.**

## Cholesterol levels:

As a rough guide, patients should aim for a total cholesterol level of 5 or below; however, this varies depending on other risk factors that are assessed.<sup>10</sup>

	Healthy level
• Total cholesterol	<b>5 or below</b>
• High-density lipoprotein (HDL)	<b>1 or above</b>
• Low-density lipoprotein (LDL)	<b>3 or below</b>
• Non-HDL	<b>4 or below</b>
• Triglycerides	<b>2.3 or below</b>

Tips for reducing cholesterol:

- Make dietary changes (e.g. eat less fatty food, and more fruit, vegetables, oily fish and wholegrain cereals)
- Increase exercise
- Stop smoking
- Reduce alcohol intake



## Blood pressure:

Hypertension is a significant cause of EPs; untreated hypertension can increase the risk of heart attack or stroke.

Men affected by hypertension may be using medicines that can cause EPs, so they may wish to discuss medication options with you. It is important to be aware of whether EPs are causing any non-compliance.

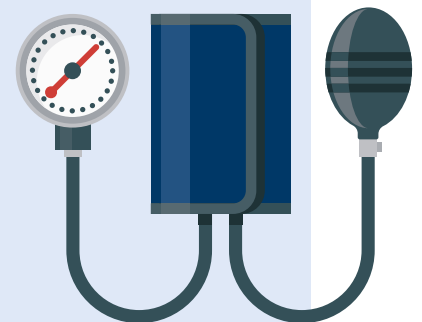
Blood pressure checks can help to identify blood pressure issues. Your pharmacy may offer blood pressure services or sell monitors that can be used at home.

### Ideal blood pressure<sup>11</sup>

90/60mmHg -  
120/80mmHg

### High blood pressure<sup>11</sup>

140/90mmHg  
or higher  
(if over 80 years,  
150/90mmHg or higher)



## Diabetes:

Diabetes is a risk factor for men with EPs.

Some men may not know they have type 2 diabetes. As well as EPs, signs to look out for are **excessive thirst, frequent urination or tiredness.**

Urine or blood tests can be used to check blood sugar levels. You may already offer a type 2 diabetes testing service, or want to consider offering one in the future.



# Mental health and everyday stresses

**Some EPs are caused by psychological factors**, such as anxiety, stress, depression, relationship issues or performance anxiety. When discussing EPs, it may be appropriate to signpost patients to other organisations, or just listen to their issues to give them an opportunity to work through their thoughts.

## Signposting:

There are several organisations, as well as their GP, who may be appropriate to signpost patients to, including:

- Samaritans
- Every Mind Matters
- Mind
- Relate
- Apps such as My Possible Self for stress

A personalised mental health action plan may also be useful:

<https://www.nhs.uk/every-mind-matters/mental-wellbeing-tips/your-mind-plan-quiz/>

**Relationship issues** that can affect sex-drive can include: over-familiarity (in a long-term relationship); disagreements in the relationship; poor communication; lack of trust and loss of sexual attraction. As men and women age, changes in hormone levels can also lead to a reduced sex drive.<sup>12</sup> Counselling may be a consideration to support men with relationship issues.

**Sign of depression** include feelings of sadness that persist, feeling hopeless and losing interest in activities that they used to enjoy. Anti-depressants can cause low libido.

**Stress** (when a person feels an unhealthy amount of pressure, above what they can cope with) can lead to short-term physical effects (e.g. shallow breathing and increased heart rate) and longer-term issues such as sleep problems and digestive issues.

## Tips to manage stress:<sup>13</sup>

Build a network of colleagues, friends and family to talk things through and to socialise with



Keep active to help clear the mind



Take steps to find a solution



Take some time to relax and have a break



Set new challenges such as learning a language to help build confidence.



### References:

**1.**NHS Erectile dysfunction (impotence) <https://www.nhs.uk/conditions/erection-problems-erectile-dysfunction/> **2.**NICE How should I assess a man with erectile dysfunction. <https://cks.nice.org.uk/topics/erectile-dysfunction/diagnosis/assessment/> **3.**NICE Erectile dysfunction: What are the causes? <https://cks.nice.org.uk/topics/erectile-dysfunction/background-information/causes/> **4.**Erectile Dysfunction (impotence). Information about your condition from The British Association of Urological Surgeons (BAUS) [https://www.baus.org.uk/\\_userfiles/pages/files/Patients/Leaflets/Erectile%20dysfunction.pdf](https://www.baus.org.uk/_userfiles/pages/files/Patients/Leaflets/Erectile%20dysfunction.pdf) **5.**Evans MF. Lose weight to lose erectile dysfunction. *Can Fam Physician*. 2005 Jan;51(1):47-9. PMID: 15732221; PMCID: PMC1479584 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1479584/> **6.**Kovac JR, Labbate C, Ramasamy R, Tang D, Lipshultz LI. Effects of cigarette smoking on erectile dysfunction. *Andrologia*. 2015 Dec;47(10):1087-92. doi:10.1111/and.12393. Epub 2014 Dec 29. PMID: 25557907; PMCID: PMC4485976 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4485976/> **7.** NHS Calculating alcohol units <https://www.nhs.uk/live-well/alcohol-support/calculating-alcohol-units/> **8.**Tips for cutting down from Alcohol Change UK <https://alcoholchange.org.uk/help-and-support/cut-down/tips-for-cutting-down> **9.**Gerbild H, Larsen CM, Graugaard C, Areskoug Josefsson K. Physical Activity to Improve Erectile Function: A Systematic Review of Intervention Studies. *Sex Med*. 2018 Jun;6(2):75-89. doi: 10.1016/j.esxm.2018.02.001. Epub 2018 Apr 13. PMID: 29661646; PMCID: PMC5960035. Ex article: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5960035/> **10.**NHS Cholesterol levels <https://www.nhs.uk/conditions/high-cholesterol/cholesterol-levels/> **11.**NHS High blood pressure <https://www.nhs.uk/conditions/high-blood-pressure-hypertension/> **12.**NHS Loss of libido <https://www.nhs.uk/conditions/loss-of-libido/> **13.**NHS Stress tips: <https://www.nhs.uk/mental-health/self-help/guides-tools-and-activities/tips-to-reduce-stress/>



# Men's Health Check

## Lifestyle Questionnaire



**These questions** can be used to help identify key lifestyle changes that might make a difference to your patient.

	✓	✗
<b>1: Do you know your:</b> <ul style="list-style-type: none"><li>• Blood pressure?</li><li>• BMI? (If not, weight/height?)</li><li>• Cholesterol level?</li><li>• Blood sugar level?</li></ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2: Do you smoke:</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3: Do you have any diagnosed medical conditions:</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4: Are you taking any regular medicines or health supplements:</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5: Do you have regular check-ups with your:</b> <ul style="list-style-type: none"><li>• GP?</li><li>• Dentist?</li><li>• Optician?</li></ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6: Diet</b> <ul style="list-style-type: none"><li>• Describe your average weekday meal: <input type="text"/></li><li>• Do you eat out or get takeaways often?</li><li>• Do you get plenty of fruit and vegetables in your diet?</li><li>• What kind of snacks do you eat? <input type="text"/></li></ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>7: Alcohol:</b> <ul style="list-style-type: none"><li>• Do you drink alcohol?</li><li>• On how many days during the week? <input type="text"/></li><li>• What would you typically drink on a weeknight? <input type="text"/></li><li>• On a weekend day? <input type="text"/></li></ul>	<input type="checkbox"/>	<input type="checkbox"/>

	✓	✗
<b>8: Exercise</b> <ul style="list-style-type: none"><li>• What exercise do you enjoy?: <input type="text"/></li><li>• How often are you able to exercise?: <input type="text"/></li><li>• Is there a mixture of strengthening (e.g. yoga, sit-ups, weights) as well as aerobic exercise (e.g. running)?</li></ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>9. General wellbeing:</b> <ul style="list-style-type: none"><li>• How would you describe your energy levels?: <input type="text"/></li><li>• How often are you troubled by feeling low or depressed?: <input type="text"/></li><li>• Do you still enjoy all the things you used to, or do you find less interest or enjoyment in activities? <input type="text"/></li><li>• Do you feel like you get enough sleep?</li><li>• Are there any other health concerns or symptoms you are worried about?</li></ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>10. What factors might be stopping you from taking up more healthy habits (e.g. time, money, motivation, physical barriers)?</b> <input type="text"/>		