Assessment Of Knowledge About Erectile Dysfunction Among Diabetic And Non-Diabetic Men

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ABSTRACT
The aim of this study is to evaluate the knowledge of diabetics and non-diabetics towards erectile dysfunction (ED). 100 individuals were surveyed, 50 of them were diabetics and the rest were non-diabetics. The mean total knowledge score obtained by diabetics was significantly higher than non-diabetics. The finding of this study suggested that health care professionals should be more proactive in disseminating health information about ED to the public in order to increase their knowledge on the disease.

Keywords: Assessment Of Knowledge, Erectile Dysfunction Among Diabetic, Non-Diabetic Men

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INTRODUCTION
Erectile dysfunction (ED) affect the quality of life, and is associated with anxiety and depression in affected men. Most men with ED are reluctant to ask for help. ED can result from poor physical health or poor psychological health or both. The main risk factors for ED are diabetes mellitus, heart disease, hypertension. Most men experience this at some point in their lives, usually by age of 40. ED tends to be more common and sever with age. Several studies have examined ED by diabetics type and duration, but few have directly compared the prevalence of this condition in men with and without diabetes. Despite the high prevalence of this condition in patients with diabetes, little is known regarding how diabetic subjects with ED differ from the general population of impotent men. ED patients with both type 1 and type 2 diabetes can be satisfactorily treated. Treatment is difficult, however, because of complications of diabetes. ED is 3-5 times more common in diabetics, and it affects 30-50% of men with DM. ED in diabetes was strongly correlated with control of blood sugar, duration of disease and diabetic complications. The incidence increased with increasing age, duration of diabetes and deteriorating metabolic control, and was higher in individuals with type 2 diabetes than those with type 1. The objective of this study is to compare the knowledge of both diabetics and non-diabetics towards erectile dysfunction.

METHODS
A study was done at a Private Urology Clinic in Wasit south east of Iraq. The criteria for diabetics and non-diabetics were males, age more than 18. Both type 1 and type 2 diabetic patients were included in the study. Data collection started in November 2015 and was completed in November 2017. At the end of the study period a total of 100 individuals was surveyed and from this number only 26 of them were diabetics and the rest were non-diabetic. The questionnaire is divided into 3 parts, namely: demographic data (7 items), knowledge regarding causes and risk factors of ED (13 items), knowledge regarding prevention of ED (6 items). Participants were awarded one point for each correct answer and zero for wrong or don’t know response.

RESULTS
The total number of sample was 100, 26% were diabetic and 74% were non-diabetic. The median age of sample studied was 40-50 years old. There was no significant demographic variability. Diabetic patients were significantly more knowledgeable regarding risk factors and preventive measures than non-diabetic people (table1). The majority of the diabetics and non-diabetics people (50% and 65%) feel less comfortable to discuss about ED with their primary physicians. Higher mean total score of knowledge performed by diabetics 12.11(3.20) compared with non-diabetic people 10.23(4.73) (p=0.002) was also observed. Most diabetic patient(70%) ask for information or inquiries directly to the health care professionals as there was significant association between diabetes and source of sexual information (p<0.001).

<table>
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<tr>
<th>Table1: Comparison between diabetics &amp; non diabetics according to mean scores of knowledge</th>
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<tr>
<td>Maximum possible score</td>
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<td>Knowledge scores</td>
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<td>A) Causes &amp; risk factors</td>
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<td>B) Prevention</td>
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DISCUSSION
People suffering from any disease will know more about their problems than do others. It was therefore strange that people with more than 10 years with diabetes to have higher knowledge scores compared to other diabetics. These results are consistent with many other studies which showed that impotent men with diabetes presented with worst ED than non-diabetic men with ED. Also erectile dysfunction is extremely common among type 2 diabetic patients and associated poorer quality of life. Duration of living with diabetes seem to have impact on the confidence to maintain an erection and it corresponds well with the results of another study conducted by Bacon et al which showed duration of diabetes was positively associated with increased risk of ED.

It was interesting to find the majority of diabetics and non diabetics correctly answered the question related to the role of wife in dissolving ED and keeping successful relations with husband. This indicated the importance of educating wives regarding management of their relationship with husbands that suffer from ED. The majority of respondents from diabetics or non diabetics have awareness regarding the danger of smoking and alcohol as risk factors for ED and usage of traditional herbs for treating ED. The majority of respondents correctly answered the role of exercise & weight reduction in preventing ED, however it was strange that the majority of both diabetics & non diabetics believe that ED is contagious & analgesics and wide spectrum antibiotics may prevent ED.

CONCLUSION
This study showed that there is an urgent need to increase awareness and educate the community towards erectile dysfunction. Although diabetic patients are more knowledgeable regarding ED, they still suffer with less satisfaction with their sexual life. Health care professionals should be more active in promoting health information about ED and the information should be accessible by all.

REFERENCES
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