Smoker’s droop - the hard facts

Impotence, or penile erectile dysfunction, is the repeated inability to have or maintain an erection.

- Smoking increases the risk of erectile dysfunction by around 50% for men in their 30s and 40s.
- Worldwide, 152 million men are estimated to have some degree of erectile dysfunction (ED), with prevalence growing to 322 million in 2025.
- Around one million men in Australia are affected, and with our ageing population the incidence of ED will escalate.
- A study by the Australasian Society of Impotence Medicine conducted in 1999, found that 30 per cent of men believe erectile dysfunction harmed their relationship.

Other impacts to male sexual health

- Reduced volume of ejaculate
- Lowered sperm count
- Abnormal sperm shape
- Impaired sperm mobility
(Source: http://www.ash.uk/papers/impotent.html)

Sex expert says

ED is increasing as a recognised medical problem. ED is mainly caused by blood flow problems within the penis itself. ED is found more commonly in men who have high blood pressure, high cholesterol, obesity and diabetes. Excessive alcohol intake and smoking also contribute. Smoking is increasingly recognised as a factor in a number of studies.

The Massachusetts Male Ageing Study in 1987, initially documented smoking as a factor as did the 1996 Perth study by the Keogh Institute. Young men who smoke will not appreciate the connection between ED and smoking, as it usually presents in the older man with the other risk factors. At this stage, stopping smoking maybe too late due to irreversible changes in the penile vasculature. It is now thought that blood flow to the female genitals may also be affected by these risk factors. Thus older women with sexual arousal problems may not have a hormone deficit but rather an effect from smoking. It is appropriate to improve warnings about the potential effect of smoking on sexual function. This may alert younger smokers to a previously undisclosed and certainly unwanted side effect. (Michael P Lowy, Sexual Health Physician Australian Centre of Sexual Health, Sydney)

Smoking and hear loss

A study published in the British Medical Journal suggested a link between smoking and grey hair in both men and women and between smoking and baldness in men. The observational study however, did not identify a causal link. (British Medical Journal, 1996 Vol 313 December, p21-28)

Smokers suffer premature ageing

Smoking destroys the ability of the skin to renew itself effectively, thus accelerating the ageing process, according to a study from a team of researchers at Japan’s Nagoya City University Medical School. Cells exposed to smoke produced far more of the enzyme responsible for breaking down skin. The researchers also found that smoke caused a drop in the production of fresh collagen by up to 40%.
(Source: Archives of Dermatological Research 2000; 292: 4:188-194)
Passive smoking and impotence link

A study that followed 513 men for up to 10 years, found that men whose lifestyles put them at risk for heart disease were also at higher risk for erectile dysfunction. Men who smoked, were overweight, had high blood pressure, or ate fatty diets, were more likely to develop impotence.

Dr. Henry Feldman and his colleagues at New England Research Institutes in Watertown Massachusetts, reported, “The well-known things that are bad for your heart are bad for sexual health”. Of note was that smoking – both active and passive (exposure to tobacco smoke) — was a key risk factor. Men who currently smoked cigarettes or cigars, and those exposed to passive cigarette smoke at home and work, had twice the rate of impotence of other men. (Source: Preventive Medicine 2000; 30:328-338)

You have a choice and when you stop smoking, you will...

► be financially better off: if you were an average smoker, you will save about $3,400 every year
► enjoy better health, you will significantly reduce your risk of lung cancer and heart disease
► feel good about your achievement and feel proud of you ability to stay in control

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