



THE LINK
BETWEEN
CARDIOVASCULAR
DISEASE
&
ERECTILE
DYSFUNCTION

A Patient Guide

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Let's talk about it.

You can find a solution that works.

1 in 4 men over age 65 experience some degree of erectile dysfunction (ED)¹⁶—and almost 70% of men with ED end up having coronary artery disease.⁶ In fact, ED can be an early warning sign of cardiovascular disease—with plaque buildup and blockage in the smaller arteries of the penis being affected sooner than the larger ones in the heart.⁷

Living with ED is tough. You may think that no one understands how you feel, and no one wants to talk about it. But there are millions of men who experience ED and know how it can affect daily life.

Our patient educators—real people with ED who found a solution that works for them—are ready to talk about it. They share with others their experience with ED: what it's like, what you can expect, and how they finally got back to feeling like themselves again.

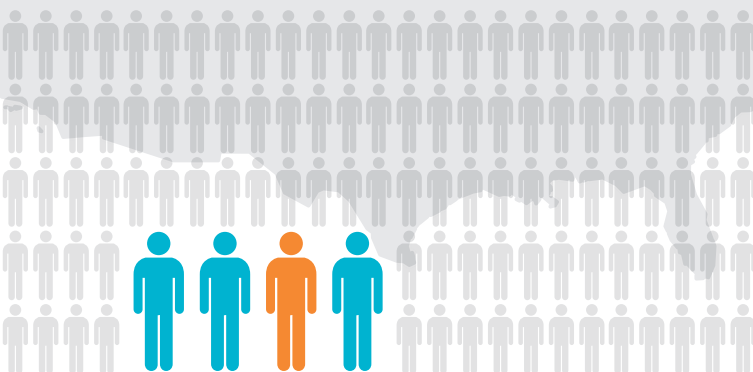
Review this guide to learn more about ED and then talk with your doctor and a patient educator.

Erectile Dysfunction: It's common and treatable

If you have Erectile Dysfunction (ED),
you're not alone:

Approximately **30 million men**
in the U.S. suffer from ED¹

Almost **70%** of men with
ED end up having coronary
artery disease.⁶



1 in 4 men
over age 65 experience
some degree of ED¹⁶

While ED is common, it's not an inevitable part of aging, and in most cases it can be overcome.¹

There are many different treatments, including **pills, injections and vacuum pumps**. A highly effective and satisfying solution is a **penile implant**.⁸ An implant involves surgery, and your doctor may recommend other options first, but a penile implant can offer a highly effective, satisfying return to an active sex life.²

There's a lot to learn, and many things to consider, so let's get started.



ED can be an early warning sign of heart problems

With coronary artery disease, a buildup of plaque inside the arteries can limit the amount of blood that's able to flow through them. If the flow of oxygen-rich blood to your heart muscle is reduced or blocked by this hardening of the arteries, the result can be angina (chest pain) or a heart attack.⁴ Because the arteries that supply blood to the penis are much smaller than the ones that feed the heart, the problem may show up earlier as having difficulty getting an erection.⁵

ED is common among patients with cardiovascular diseases (CVD). Sexual problems usually precede the onset of CVD, and should, therefore, be considered as a risk factor for cardiac events. Similarly, patients with pre-existing CVD are at increased risk of experiencing ED. Therefore, ED and CVD might be considered as two different clinical manifestations of the same systemic disease.⁷

What it means for you

If you are experiencing ED, you should talk with your doctor about your potential risk for cardiovascular disease. And if you're already taking certain medications such as nitrites for your heart or alpha-blockers to manage blood pressure, your doctor will discuss whether ED medications are right for you or whether other options may be more appropriate.



In one study that followed men for an average of six years, those with ED were



62%

more likely to have a heart attack, and



44%

more likely to have a cardiovascular event.⁶

Erections and How They Work¹

Sexual stimulation and excitement cause the brain, nerves, heart, blood vessels and hormones to work together to produce a rapid increase in the amount of blood flowing to the penis.

The blood fills the two spongy chambers (called the corpora cavernosa) in the shaft of the penis.

As the chambers rapidly fill with blood, they expand, compressing the veins and trapping the blood in the penis. The penis becomes firm and elongated, resulting in an erection.

ED problems can happen when your brain doesn't send the right signals, when erectile tissue is damaged, or when there isn't enough blood flow – such as when the arteries that carry blood to the penis become narrowed by a buildup of plaque (atherosclerosis).

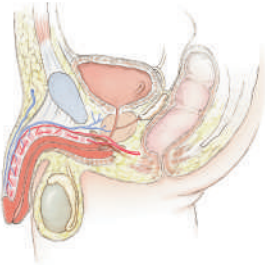


Fig. 1

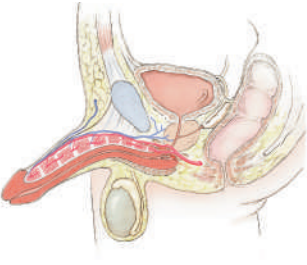


Fig. 2

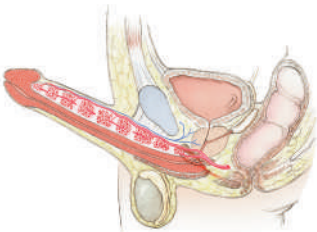


Fig. 3



What is Erectile Dysfunction?¹

ED is the consistent inability to sustain an erection sufficient for sexual intercourse.

That can be:

- Not getting an erection at all
- Getting an erection inconsistently
- Getting an erection that doesn't stay hard enough for sex

Causes of ED

For more than 80% of men with ED, it is caused by a physical problem or disorder.³ The cause can usually be identified, and proper treatment can help you return to a satisfying sex life.²

Physical causes¹:

- **Injury** (such as brain or spinal cord injury)
- **Disease** (such as heart disease, high blood pressure, high cholesterol or diabetes)
- **Surgery** (such as removal of the prostate gland)
- **Substance use** (such as tobacco, drugs, alcohol, and some medications)

80% of ED is caused by a physical problem or disorder.³



Proper treatment can help you return to a satisfying sex life.⁸

Treatment Options¹

There are different ways to treat ED. Your doctor can discuss these with you, and help you consider your individual needs, and the benefits and risks of each treatment option.

- **Lifestyle changes** like stopping smoking, losing weight, and eating healthier
- **Oral ED medications** like Viagra®, Cialis® or Levitra®
- **Vacuum** erection devices
- **Injecting medication** directly into the penis
- **Penile implant:** flexible or inflatable



"I underwent all the processes I thought might help, but nothing helped me. So I said well, I have to do this because it's the only solution I have. And, the only thing I regret is not doing it sooner, because I'm a much happier man after the Coloplast Titan penile implant."

– MARTIN*

Coloplast Penile Implants

A penile implant is a discrete device that is placed into a man's penis and is designed to help him get an erection.⁸ Once implanted, it helps put the man back in control of his body, and can be used at any time, unlike other treatment options where there may be a short waiting period for them to be effective.¹⁷ A penile implant is an effective solution⁸ for men who are suffering from ED that has not been resolved by other available treatment options.

A penile implant involves a routine surgical procedure. The majority of men can return home within a day of surgery, and after full recovery, may resume sexual activity after 4-6 weeks.¹ Your physician will discuss the details of the procedure, your recovery process, and using the implant.

Penile implants have been an effective standard of care for men suffering from ED for many years⁸, and can offer hope and a return to intimacy and a normal life for many men with ED.¹⁸ There are two types of penile implants that Coloplast offers:

- **Titan**[®] inflatable penile implant produces a controllable erection that acts and feels more like a natural one.⁸
- **Genesis**[®] flexible penile implant produces a permanently firm penis and may be appropriate for men with limited hand dexterity.¹¹



Patients report a **98% satisfaction rate** for inflatable penile implants⁸

Both types of penile implants are **totally concealed** in the body, and give a man with ED the ability to have an erection – instantly, whenever the time is right, for however long he and his partner want. It puts the man back in control and back to a normal life.¹⁸

Coloplast Titan[®] Inflatable Penile Implant⁹

The Titan inflatable penile implant is a self-contained, fluid-filled system made from silicone and Bioflex[®], a supple yet durable material. **There are three parts to the system, connected by silicone tubing:**

1

A reservoir
(placed in the abdomen)

2

Two cylinders
(placed in the shaft of the penis)

3

A pump
(placed in the scrotum)

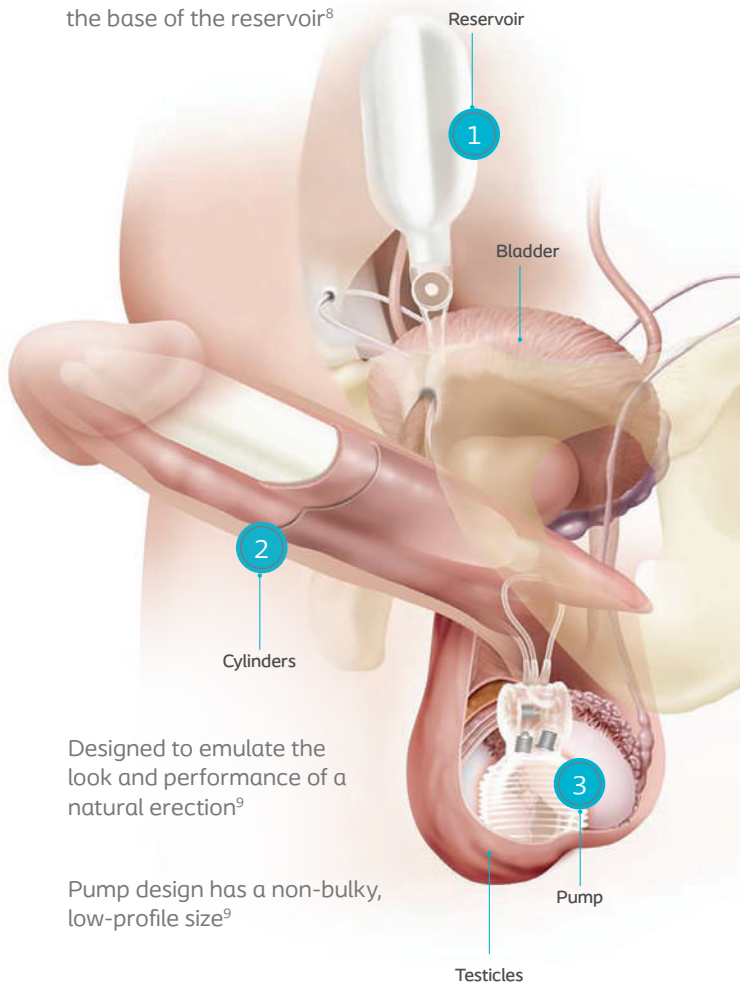
When you squeeze the pump bulb, it moves the fluid from the reservoir into the penile cylinders, creating an erection. When you press the deflate button on the pump, the fluid moves out of the penis and back into the reservoir for a natural looking flaccid state.

Visit TitanInflate.com for a demonstration video.

Titan Features⁸

- Easy to use and activate
- One-step deflation
- Not visibly noticeable when flaccid
- Acts and feels like a natural erection
- Maximizes the girth of the penis

The only IPP with a true lock-out valve located at the base of the reservoir⁸



Designed to emulate the look and performance of a natural erection⁹

Pump design has a non-bulky, low-profile size⁹

“The Coloplast Titan has brought the intimacy and spontaneity back to our love life. It was lost with the pills, pumps, and shots, which all made it too mechanical and more of a chore than an expression of our love for each other.”

– RAYMOND*

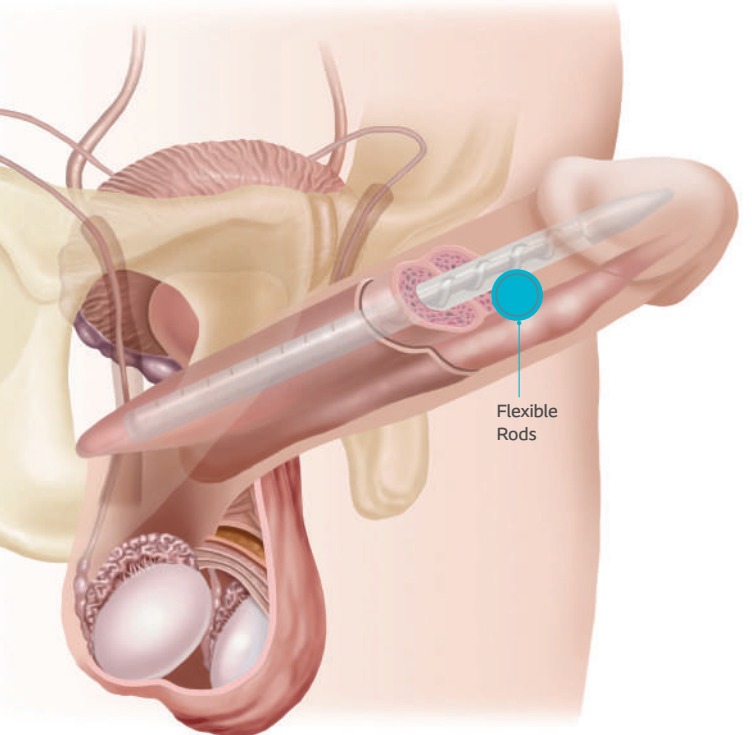
Coloplast Genesis[®]

Flexible Penile Implant¹⁰

The Genesis is a flexible penile implant that consists of two firm but flexible rods that are placed into the shaft of the penis. There are no other parts to this implant. To have an erection, you simply hold the penis and move it into the desired position. When you are finished, you bend it back down to conceal it.

Genesis Features¹¹

- Easy for you or your partner
- Good option for men with limited dexterity
- Because it stays firm when not erect, may be more difficult to conceal in clothing





Important Risk Information

A penile implant requires surgery. Risks of surgery may include but are not limited to complications such as infection, swelling, pain and discomfort. Once implanted, there may be a chance of infection, erosion, product migration or device malfunction which may require additional surgery. Your physician will provide complete risk information for your situation.

Frequently Asked Questions

Q. Can I have an orgasm with a penile implant?

A. You should be able to have an orgasm with a penile implant if you were able to have one before the implant.¹² Consult your physician about your expected outcome.

Q. What is the recovery time?

A. Everyone is different and recovery time varies, but typically it's between 4-6 weeks until you can resume sexual activity.¹ Your physician will determine what you can and can't do during this time. It is important to follow all recommendations from your physician for the best outcome.

Q. Will I lose any length after getting a penile implant?

A. Each penile implant is custom-fitted to your anatomy, and the implant itself does not lead to a loss in size. Depending on your medical history, changes in anatomy or atrophy can result in loss of penile length prior to the implant, and it may not be unusual to lose 1-2 centimeters from your original erect length.¹⁴

Q. Will anyone notice that I have an implant?

A. The implant is completely placed inside your body. The Titan[®] inflatable penile implant is not visibly noticeable. The penis appears relaxed and normal when in the flaccid state⁴, and it is not obvious by looking at a man that he has an implant. The Genesis[®] flexible rod implant stays firm when not in the erect position, and it may "show" through clothes.

Q. How long does the penile implant last?

A. A study showed that 60% of initial implants would survive 15 or more years without revision or extraction.¹³

Q. Will I be able to have spontaneous erections with a penile implant?

A. Both the Titan and the Genesis give you the ability to have an erection instantly and spontaneously, any time you want one.^{9,10} However, the implant surgery makes it impossible to ever have a “latent” or natural erection that’s not dependent on the device. Therefore, you should consider carefully whether or not an implant is the right choice for you.

Q. What is the difference between the Genesis and the Titan implants?

A. Both help give you the ability to have an erection satisfactory for intercourse. The main difference is that the Genesis is a flexible (malleable) implant that consists of two firm but bendable rods that are placed into the shaft of the penis (corpora cavernosa). There are no other parts to this implant. To have an erection, you simply hold the penis and move it into the desired position. When you are finished, you return the penis to its tucked-down position.¹⁰ With the Titan, you inflate the cylinders by squeezing the pump bulb located in your scrotum, and deflate by pressing the release valve to return the fluid from the cylinders into the reservoir.⁹

“I’m able to walk into the room now and be that guy that I always wanted to be, just confident and self-assured and knowing what I want. That has made all the difference for me.”

– BRIAN*

Sexual Health Inventory for Men (SHIM)¹⁵

Over the past 6 months:

<p>1. How do you rate your confidence that you could get and keep an erection?</p>		<p>Very Low 1</p>
<p>2. When you had erections with sexual stimulation, how often were your erections hard enough for penetration (entering your partner)?</p>	<p>No sexual activity 0</p>	<p>Almost never or never 1</p>
<p>3. During sexual intercourse, how often were you able to maintain your erection after you had penetrated (entered) your partner?</p>	<p>Did not attempt 0</p>	<p>Almost never or never 1</p>
<p>4. During sexual intercourse, how difficult was it to maintain your erection to completion of intercourse?</p>	<p>Did not attempt 0</p>	<p>Extremely difficult 1</p>
<p>5. When you attempted sexual intercourse, how often was it satisfactory for you?</p>	<p>Did not attempt 0</p>	<p>Almost never or never 1</p>

Low 2	Moderate 3	High 4	Very High 5
A few times (much less than half the time) 2	Sometimes (about half the time) 3	Most times (much more than half the time) 4	Almost always or always 5
A few times (much less than half the time) 2	Sometimes (about half the time) 3	Most times (much more than half the time) 4	Almost always or always 5
Very difficult 2	Difficult 3	Slightly difficult 4	Not difficult 5
A few times (much less than half the time) 2	Sometimes (about half the time) 3	Most times (much more than half the time) 4	Almost always or always 5

Add the numbers corresponding to questions 1-5.
TOTAL: _____

The Sexual Health Inventory for Men further classifies ED severity with the following breakpoints:

1-7 Severe ED

8-11 Moderate ED

12-16 Moderate to Mild ED

17-21 Mild ED

Supporting a Partner with ED

DON'T blame yourself.

When men struggle with ED, spouses or partners tend to blame themselves first. They think it's their fault, that maybe their partner isn't attracted to them anymore. They often don't realize that the ED is likely caused by a medical problem.

DO your homework.

Many people view ED as a sexual issue, when in fact, it's usually a physical one. Conditions such as diabetes, high cholesterol, or early-stage heart conditions can all contribute to ED.¹ Even certain medications can bring on ED.¹ The sooner you realize that this is a medical condition affecting your partner's body, the faster the healing can begin.

DON'T approach the issue with negative emotions.

A man with ED can often experience deep feelings of shame, loneliness, anxiety and depression. He may often say that the inability to have an erection makes him feel like less of a man. He may be hesitant to kiss or cuddle because he is embarrassed about where it might lead. Confronting him with feelings of hurt or anger may cause him to feel attacked and withdraw even further.

"After the operation, I noticed a change in my husband in terms of his self-esteem. It's something that's made him feel comfortable and happy; he feels like a different man."

– ANABEL*

DO open the lines of communication.

Have a conversation with him – but not in the bedroom. Put some time and space between your conversation and your last sexual encounter. Make him aware of the health conditions that can cause ED, and gently suggest he see his doctor. Some men may ask you to join them at their appointment, while others may prefer to have a private conversation with their physician. Let him decide.

DON'T tell him that his ED doesn't matter.

Some people think they are being helpful by saying their partner's ED isn't a big deal. The truth is, it may matter deeply to him, and suggesting otherwise sends the message that you don't miss intimate sexual contact with him, which can be hurtful.



Insurance Information

Employer and Individual Plans

Most plans provide coverage for penile implant surgery, as long as it meets the criteria for being medically necessary.** All plans include some limitations, however, and exclusions for penile implants do occur. Before scheduling a procedure, you'll need to determine if it is covered by your plan. Your physician's office will likely contact your insurance company to check benefits, but you may wish to contact them yourself to make sure you understand what any out-of-pocket expenses might be.

Medicare

Medicare and Medicare Advantage provide coverage for penile implant surgery as long as it meets the criteria for being medically necessary.** Traditional Medicare does not require any authorization for these procedures, but if you have Medicare Advantage, your physician may need to get approval before scheduling your surgery.

Medicaid

Medicaid coverage for penile implants varies a great deal between states. Your physician should be able to advise you about local coverage, or you can contact the Medicaid program directly for answers about coverage.

Uninsured

If you do not have insurance or your existing insurance does not cover a penile implant, there are still options to consider for making the procedure more affordable. For example, you may wish to explore alternative insurance policies or financing options. Costs can vary widely between different physicians and facilities, and many health providers offer financial assistance for non-insured patients.

To learn more, talk with your doctor or visit www.coloplastmenshealth.com/insurance/ for additional insurance information.

** A penile implant is considered medically necessary when the patient's erectile dysfunction is the result of organic (rather than psychogenic) causes, and he has found non-invasive treatments (drugs, injections and/or vacuum devices) to be ineffective.



Let's Talk

Through our **Patient Educator Program**, we offer the opportunity for you to talk candidly with men who have a penile implant and want to share their experiences with others, as well as some of their partners. They're not doctors and they don't give medical advice. They are simply real people who once suffered with ED, and decided on a Coloplast penile implant to help restore their sex lives. You can set up an appointment to speak personally and confidentially with them, one-on-one, about their experiences with ED and their journey to a satisfying solution.

Visit EDsolution.com and click on "Talk to a Patient" to schedule a conversation today.



EDsolution.com

Use the [physician locator](#) to find a physician who specializes in erectile dysfunction.

Confidentially [talk to a patient](#) or spouse about their experience.

[View videos](#) and animations about how a penile implant works.

Para pacientes de habla española, visite LaBombita.com

LA BOMBITA[®]
Coloplast

Take the Next Step

Discover whether a penile implant is the way for you to restore your sex life.

- 1 • Visit EDsolution.com to hear more patient stories, schedule a conversation with a patient educator, see how a penile implant works or to locate a urologist who specializes in ED.
- 2 • Take the [Sexual Health Inventory for Men \(SHIM\)](#) survey in this brochure, and share it with your doctor.
- 3 • **Set up an appointment** with your doctor to learn more about erectile dysfunction and penile implants and discuss your options.



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