

The Healthy Male

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Newsletter of Andrology Australia – Australian Centre of Excellence in Male Reproductive Health

Seventy and still enjoying sex

The number of people in Australia aged over 65 is estimated to increase by 50% over the next 10 to 15 years. Looking after the health of an ageing population is a primary concern of the Australian Department of Health and Ageing. The Government's 'National Strategy for an Ageing Australia' states that 'Health and well being across the lifespan including older age will continue to be high priorities.'¹

Not much, however, is known about sexual behaviour in the older population. As sexual activity contributes to the well-being and quality of life of seniors, this makes sexual health an important health issue.

As part of the 'Men In Australia Telephone Survey' (MATeS) conducted by Andrology Australia, over one third of men over 70 years are still sexually active.²

There are obstacles to treating sexual health issues in this age group because of the lack of awareness about seniors continuing to enjoy sexual activity.

Many doctors are not comfortable in bringing up the topic of sexual health with

their older patients because they often assume they are sexually inactive. And it seems that older patients do not feel comfortable raising the topic with their doctor because they believe the doctor will think they are too old to be having sex!

It is important for both doctors and seniors to be comfortable enough to discuss issues of sexual health during consultations. Public education campaigns and resources are needed to help in making this possible.

More research also needs to be done in this area so that a better understanding of sexual behaviour in the older population is gained, and appropriate health services are created. This will then allow sexual health issues to be better addressed in the older population.

Reference:

¹ 'National Strategy for an Ageing Australia' available at <http://www.health.gov.au>

² Holden CA, McLachlan RI, Pitts M, Cumming R, Wittert G, Agius P, Handelsman DJ and de Kretser DM. Sexual activity, fertility and contraceptive use in middle-aged and older men: Men in Australia Telephone Survey. Human Reproduction 2005; 20: 3429-3434



From the Director

Welcome to the first edition of the newsletter for 2006. I hope you all had an enjoyable festive season and a safe new year.

To celebrate the beginning of 2006 and the 5th year of writing this newsletter, we have decided to revamp our look. These changes have come about in response to a survey about the newsletter that many of you completed. We thank you for your responses and have taken on some of your suggestions.

As well as a new design and layout of the newsletter, a new section 'Latest News' has been included. In this section you will find some of the latest research on male reproductive health, as well as updates on

new treatments as they become available in Australia. Interesting stories that have surfaced in the media about male reproductive health will also be included.

We hope you like the changes that have been made, and trust that this newsletter will continue to bring interesting news and updates on male reproductive health.

This issue of the Healthy Male focuses on sexuality in the older male.

Professor David de Kretser

Prestigious public health award won

Andrology Australia has won a coveted award in research innovation for the 'Men in Australia Telephone Survey' (MATEs).

The award, presented at the Victorian Public Health Awards for Excellence and Innovation, recognises significant contributions made to promoting the health and well-being of Victorians.

Dr Carol Holden, CEO of Andrology Australia, was honoured to receive the award presented by the Victorian Minister for Health, the Hon. Bronwyn Pike, MP in recognition of the study's contribution to men's health in Australia.

"For the first time in Australia we have a snapshot of general and reproductive health issues in men over the age of 40 years," said Dr Carol Holden.

Dr Carol Holden and Professor David De Kretser with the award.



"The alarming statistics show that almost two thirds of men aged over 40 are overweight and obese, and one third of men have prostate problems, erectile dysfunction or urinary tract symptoms," Carol said.

"This study highlights the need for community and health professional education which will help to improve awareness and services for middle-aged and older Australian men," she said.

Almost 6000 men took part in MATEs, which focused on socio-demographic issues, general health and lifestyle, sexual function, relationship issues, and knowledge, attitudes and beliefs on male reproductive health. The largest survey of its kind in Australia, the study also highlights the need for a longitudinal study on men's health to further understand the incidence and progression of men's health disorders.

Community education

The importance of reproductive health in men with a progressive life-limiting illness was discussed recently at community information sessions in Leeton and Finley, NSW.

Dr Carol Holden, CEO of Andrology Australia, was invited by the Murrumbidgee Division of General Practice to speak at the seminars as part of a community consultation on palliative care.

The 'Palliative Care in our Community' information sessions addressed men's reproductive health issues; rural palliative care at a national level; palliative care services provided in the local community; and Palliative Care: a general practitioner's perspective.

prostate and urinary tract problems. For younger men whose fertility may be affected by treatments for chronic disease, they may also be encouraged to store semen to help allay anxieties and maintain a positive outlook for the future.

Providing information on male reproductive health to the community and service providers will help men and their carers discuss these disorders with their doctor and palliative care team. It will also enable them to find out whether treatments are available to alleviate symptoms associated with these disorders.

Following the success of the community education sessions, Andrology Australia hopes to continue to work together with the Murrumbidgee Division of General Practice to provide education for GPs in the area of male reproductive health. Andrology Australia would also like to thank Anthony McPhail, Palliative Care Project Coordinator of

the 'Building Better Links for Better Palliative Care' from the Division, for the invitation to speak and for his role in developing the seminars.

Education seminars are an effective way of disseminating information to community groups, community health centres and workplaces. Andrology Australia was involved in a number of community health seminars in 2005 by providing a speaker for these events.

Dr Megan Cock, Project Officer at Andrology Australia, discussed men's reproductive health at Rotary clubs and also community health centres around Victoria. If you are based in Victoria and are interested in inviting a speaker from Andrology Australia for a health event in 2006, please contact us. For events being held in other states, with advance notice Andrology Australia may be able to provide speakers in some instances. Phone: 1300 303 878.

Putting men in the picture with palliative care

Dr Holden said that men's reproductive health is important in any setting, with significant numbers of men affected by erectile,



Focus on Sexuality, fertility and contraceptive use in older men

Author: Professor Marion Pitts

Understanding the sexual behaviours and fertility needs of older men is necessary for the development of appropriate medical and public health education, services and information targeted to an ageing population. By exploring attitudes, experiences and knowledge regarding sexual health as men age, information collected may also provide insight into the development of education programs better targeted to younger men.

The 'Men in Australia Telephone Survey' (MATeS) commissioned by Andrology Australia was a national, cross-sectional study investigating male reproductive health in men aged 40 years and over.

Information was collected to describe the self-reported rates of male reproductive health disorders, as well as broad aspects of health and well-being. Sexual activity, fertility and contraceptive use amongst these men were also discussed.

Why is MATeS different from other studies on reproductive health?

Reproductive health issues are almost exclusively explored in the context of women's health or HIV/AIDS research, with many studies defining an upper age limit. This is often because of the difficulties in recruiting older people to take part. Older people also tend to be excluded from studies because they are considered to be at low risk of HIV/AIDS, have minimal contraceptive needs and are often perceived to be sexually inactive.

MATeS has demonstrated that by the use of an anonymous telephone questionnaire to survey a sample of men without an upper age limit, it is possible to recruit older men into reproductive health surveys. It has also shown that many older men remain sexually active.

How sexually active are Australian men?

Sexual activity continues into older age with many men maintaining satisfactory sexual relationships. Overall, about 78% of men aged 40 years and older had been sexually active in the 12 months prior to taking part in the interview. Of the men who were sexually active, 93% had a regular partner, 4% had casual partners and 3% of men had both regular and casual partners.

Most of the men interviewed were in heterosexual relationships, with only 0.5% of men over the age of 40 years identifying themselves as being in a homosexual relationship with a regular and/or casual male partner.

The number of times that men would like to have sex was an average of twice a week, and 40% of men would like more sex than they are currently having.

Of the 22% of men who had not had sexual activity in the last 12 months, approximately 59% of these men were married or living as married.

Are older men sexually active?

Many older men remain sexually active and continue to have physically satisfying sexual relationships. With 380 men over the age of 70 years taking part in the survey, more than one third (37%) of these men were still sexually active.

In this 70+ age group, one quarter of men wanted more sex than they were having, but over half of men reported being less interested in sex than they were six months earlier.

Although the desire for sex, and the frequency of having sex changed with age, sexual physical pleasure with a partner was the same as for younger men.

How common is the use of commercial sex services?

It was not uncommon for men to use commercial sex services, with 14% of all men having used these services in their lifetime.





On average, men who used commercial sex services in the 12 months before the interview (2%), paid for sex about four times per year. Of those men that had used commercial sex services in the previous 12 months, 14% had a regular sexual partner.

Commercial sex services can play a part in helping men take part in sexual activity if they do not have a regular partner. However, it also plays a role in the lives of some men who have a regular partner. Thus, more research is needed into the use of commercial sex services and the motivations, needs and experiences of the men who use them.

Do Australian men want to be fathers?

While there are some men who never want to have children (8%), more than one third of men without children would still like to be fathers.

Men aged over 70 years had more children (2.8) compared with younger men (2.1). The average number of children in families has decreased, which is a reflection of the demographic change to smaller families in the second half of the 20th century.

There are still men having large families, and the survey found that men with six children or more were more likely to be living in regional and remote areas (61%) compared with major cities (42%).

How fertile are Australian men?

About 12% of all men aged over 40 years have never had children. This survey also revealed that almost 8% of men had tried but been unable to have children, making this the first study to estimate the rate of involuntary infertility in Australia. This information has implications for health policy and education.

Nine per cent of all men aged over 40 years had had a fertility test and this is highest at 12% in the youngest age group (40-49 years) compared with men over 70 years (5%). The higher prevalence of infertility testing in younger men is most likely due to greater awareness, availability and use of fertility services rather than an increase in infertility.

Is vasectomy a popular form of contraception?

One in four Australian men aged over 40 years has had a vasectomy. Australia has one of the highest vasectomy rates in developed countries, showing a willingness of Australian men to take responsibility for family planning.

Older men 70+ years were less likely to have had a vasectomy (7%) than younger men aged 40 – 49 years (31%). Men in remote areas (19%) were less likely to have had a vasectomy compared to men in major cities and regional locations (25%).

While 9% of men with a vasectomy regretted having had the procedure, only about 1% of vasectomised men had a vasectomy reversal. Quality educational material needs to be provided to men before they undergo a vasectomy, highlighting that vasectomy surgery should be considered as irreversible.

Do men practice safe sex?

About 40% of men over 40 years having casual sex do not use condoms. This implies that an emphasis on safe sex practices is being ignored by men who are at risk of STI infection from casual partners. It was also found that men in the older age groups (70+ years) were less likely to use condoms in casual relationships.

Men in remote areas were less likely to use condoms in casual sexual relationships (50%) compared to men in major cities (65%). Men with a higher education level (above secondary level) were more likely to use condoms in casual sexual relationships (66%) compared to men with lower education levels (43%).

Two thirds of the men surveyed had ever used condoms, and of these men, half reported that they interfered with sexual enjoyment. The need for condom use should be considered at all ages, whether it is for contraception or STI prevention.

Where to next?

The findings from this study have implications for improving a variety of professional education services and community attitudes towards sexuality in older people. While sexual problems may impact on psychological health and well-being, even though age may influence this effect, few men discuss or seek treatment for sexual health problems. This may in part be related to perceived communication barriers that prevent patients comfortably discussing sexual health problems with a medical practitioner.

With a stereotypic image of older people being sexually inactive, improved research, education and policy is needed to ensure that age-related barriers to seeking information and treatment for reproductive health issues do not persist for older men.

Survey findings on which this article is based have been published in:

Holden CA, McLachlan RJ, Pitts M, Cumming R, Wittert G, Agius P, Handelsman DJ and de Kretser DM. Sexual activity, fertility and contraceptive use in middle-aged and older men: Men in Australia, Telephone Survey. *Human Reproduction* 2005; 20: 3429-3434

A summary report is available as a hard copy from Andrology Australia. For your copy ph: 1300 303 878 or email: info@andrologyaustralia.org

Medical perceptions towards sex and ageing

Despite links between ageing and sexual dysfunction, the majority of adults continue to be sexually active well into their later years. Conditions such as erectile dysfunction, however, present one of many obstacles to maintaining a healthy sex life.

Given the sensitive nature of sexual difficulties, many men are reluctant to seek medical advice. It is therefore essential that GPs and other health professionals are equipped to provide informed and unbiased advice and treatment for men of all ages.

Andrology Australia has supported a review of the literature to determine current medical approaches and perceptions of sexuality in the older male, so that any barriers to effective sexual health management can be addressed and education programs for health professionals can be developed.

The review identified that many GPs regard sexual functioning as an important health issue in ageing. However, GPs are often reluctant to begin discussions about sexual health

with older patients, including those GPs proactive in discussing sexual health with younger patients. Often the barriers are attitudinal, including stereotyped views of sexuality and ageing.

It appears that a patients' reluctance to begin discussions about a sexual health problem can worsen these GP barriers, by reinforcing assumptions about asexuality later in life. Patients' expectations that their doctor does not see sex as important for older men, also acts as a barrier for men to seek treatment.

Attitudes and professional approaches to ageing and sexuality are quite varied amongst different health professionals. The review identified that some nurses, for example, are pleasantly surprised to learn that an older patient is still sexually active and comfortable enough to talk about it. Other nurses are less likely to bring up the topic of sex with older patients, and are more inclined to listen for cues from the patient before starting discussions about sexual health.

As a result of a longer life-span, an increasing number of older adults need

to spend part of their life in a residential aged care facility. In this setting, the literature review identified that sexual expression amongst residents is very restricted, with limited opportunities for private time with others and open displays of affection. Professional training is vital to address the knowledge, skills and attitudes of health care providers responsible for the sexual needs of older adults in long-term care settings, and to make sure they receive consistent and unbiased care.

This review of the literature highlights the importance of ongoing education and training to promote proactive management of older males' sexual health concerns by GPs and other health professionals. The review will be used to both inform future professional education strategies, and gauge the strengths and gaps in existing research.

The review was conducted by the Monash Department of General Practice. For further information on this review, contact Catherine.Andrews@med.monash.edu.au



Latest news

Erectile dysfunction linked with metabolic syndrome

Recent studies have linked erectile dysfunction with metabolic syndrome; a condition which leads to an increased risk of coronary heart disease, stroke and type 2 diabetes.

A person with metabolic syndrome has abdominal obesity (large waist circumference), high cholesterol levels, high blood pressure, and insulin resistance or glucose intolerance. Other conditions associated with the syndrome include ageing, physical inactivity, hormonal imbalance and genetics.

Research conducted in 2005 in Naples, Italy showed that as the number of

characteristics for metabolic syndrome increased, the prevalence of erectile dysfunction also increased.¹ This suggests that the risk factors for both erectile dysfunction and metabolic syndrome are the same.

The relationship between these two health problems implies that men with metabolic syndrome are most likely to have erectile dysfunction. Also, erectile dysfunction may be an early warning sign for cardiovascular disease and diabetes because of the link with metabolic syndrome.

Erectile dysfunction can have a significant effect on quality

of life and affects about one in five men in Australia over 40 years. It is important that men adopt a healthy lifestyle including a healthy diet, as well as taking part in regular exercise, to avoid metabolic syndrome and potential erectile dysfunction.

If you are experiencing erectile dysfunction, it is important to see your doctor and get a full health check to rule out other more serious life-threatening conditions.

¹ Esposito K, Giugliano F, Martedi E, Feola G, Marfella R, S'Armiento M, Giugliano D. High Proportions of Erectile Dysfunction in Men With the Metabolic Syndrome. *Diabetes Care* 2005; 28:1201-1203

In brief

Klinefelter Syndrome booklet available

Boys with Klinefelter Syndrome have two or more 'X' chromosomes instead of one, leading to a range of conditions including androgen deficiency, infertility, potential learning difficulties and feminine physical characteristics forming through puberty. One in 600 boys has Klinefelter Syndrome with the condition significantly under-diagnosed in Australia.

Booklets on Klinefelter Syndrome are now available as part of the 'Hormones and Me' series, supported by Serono Symposia International. This booklet was authored by paediatric Endocrinologist Dr Margaret Zacharin and free copies are available through your local doctor or from Andrology Australia. Phone: 1300 303 878.

Erectile dysfunction research – couples needed

Men aged 40 plus, and their partner, are invited to have their say in a national research study exploring the impact of erectile dysfunction (ED) medications on relationships. Couples who are currently using an oral ED medication to improve their sex life are encouraged to be involved, by individually completing a survey pack and friendly telephone interview. Participation is completely confidential. Participants each receive a \$40 shopping voucher and access to a report of findings from other couples in similar situations.

This project is conducted by the Department of General Practice, Monash University with funding support from Andrology Australia. To find out more, contact Cath Andrews by 23 February 2006 on ph: 03 8575 2223 or email: Catherine.Andrews@med.monash.edu.au

Recent events

Director recognised for outstanding contribution to medical science

Professor David de Kretser, Director of Andrology Australia, gave the distinguished Edwards Oration at the ASMR National Scientific Conference in late 2005 in recognition of his outstanding contributions to medical research.

To accept this eminent Edwards Oration, David spoke on, 'The roles of the inhibins, activins and follistatins: A thirty year journey from reproduction to inflammation and beyond. A case for curiosity driven research.'

Men's health wallet card

Andrology Australia receives many requests for details of support services for a range of men's health issues. In response, a small information card has been developed that neatly fits into a wallet, making contact details of relevant services readily accessible.

The card provides phone numbers of confidential services and can help when making decisions about your health. If there are support services that are not included, please let us know and we will endeavour to incorporate them into future revisions.



A copy of this wallet card has been provided with this issue of the Healthy Male. If you would like more copies of the card for your friends and colleagues, or to make available at men's health events, please call 1300 303 878 or email info@andrologyaustralia.org

Newsletter of Andrology Australia

Australian Centre of Excellence in Male Reproductive Health

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