



Impact of Acute and Chronic Co-morbidities on Psychosexual Concerns

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It is acknowledged that there are a myriad of acute and chronic co-morbidities associated with psychosexual concerns [1]. As radical prostatectomy is one of the most widely accepted treatments for prostate cancer [2], there are “to be expected” side effects (EAU Guidelines 2016). There are conflicting rates of erectile dysfunction, which may not only be associated with degree of surgery, but also presence of co-morbidities [3]. Vascular, cardiac and diabetic comorbidities have the greatest impact [2, 4]. Age will not improve erectile function [5]. Additionally, if a patient has poor erections before surgery, post operatively, erections will not improve [6]. This is also a taboo area, which may act as a barrier to psychosexual care.

References

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