
Overview

This standard covers the assessment of a man with diabetes for erectile dysfunction. It is likely to apply following a referral from a more general consultation or a routine appointment to monitor the health and well-being of a man with diabetes. It may lead to an agreement about treatment which may or may not be addressed during the assessment consultation. It has been estimated that the prevalence of erectile dysfunction in men with diabetes may be as high as 75%. It is associated with significant psychological morbidity and is, therefore, as important as many other complications of diabetes. However, a general reluctance amongst patients and some health professionals to discuss sexual functioning means that it often goes unrecognised, unreported and untreated.

Users of this standard will need to ensure that practice reflects up to date information and policies.

SFHDiabED02

Assess a man with diabetes for erectile dysfunction

Performance criteria

You must be able to:

- P1 communicate with the man being assessed, and his partner if present, in a manner appropriate to them which encourages an open exchange of information
- P2 confirm that the man, and his partner if present, understand the nature and purpose of the assessment and give their consent
- P3 create a climate for full disclosure by explaining what erectile dysfunction is and by emphasising its prevalence amongst men with diabetes
- P4 if he has not done so, establish whether the man is willing to involve his partner in the assessment process and, as necessary, arrange for a further joint appointment
- P5 enquire sensitively about the man's sexual functioning by seeking to establish:
 - P5.1 what kind of erection the man can achieve
 - P5.2 how long the erection can be maintained
 - P5.3 how long he has been unable to achieve or maintain a penile erection adequate for satisfactory intercourse
 - P5.4 whether the onset was sudden or gradual
 - P5.5 whether the man's libido is normal or low
 - P5.6 whether premature, delayed or retrograde ejaculation occurs
 - P5.7 whether the man can successfully self-stimulate
 - P5.8 when the man last had satisfactory intercourse
 - P5.9 whether nocturnal or morning erections are present or absent
 - P5.10 whether there are any current or recent sources of stress in the man's life
 - P5.11 whether he is or has recently been experiencing symptoms of anxiety and or depression
 - P5.12 his perceptions of the quality of his relationship with his sexual partner
- P6 refer to or take a medical and family history and note any medication the man is taking, whether he is a smoker and what his level of alcohol intake is
- P7 if it has not been done recently, undertake - or arrange for a medical practitioner to undertake - an electrocardiogram recording, stethoscopic examination of the heart for murmurs or arrhythmias, and palpate peripheral pulses to assess for peripheral vascular disease
- P8 conduct, or arrange for a medical practitioner to conduct, a genital examination to assess for penile abnormalities, scrotal swellings or other pathology
- P9 if recent test results are not available, order or arrange for appropriate blood tests to exclude causes other than diabetes
- P10 take all the relevant information you have gathered into account to assess the existence and level of erectile dysfunction, to exclude causes

SFHDiabED02

Assess a man with diabetes for erectile dysfunction

- other than diabetes, and to determine the appropriate care and treatment
- P11 make a record of your assessment, communicate the outcome to the man, and if present - and with his consent - to his partner
- P12 with the man's agreement, discuss - or arrange a further appointment to discuss - treatment options or, if an underlying cause other than diabetes has been identified, refer or arrange for the man to be referred to the appropriate specialist

SFHDiabED02

Assess a man with diabetes for erectile dysfunction

Knowledge and understanding

You need to know and understand:

- K1 national guidelines for diabetes management, education and service delivery
- K2 theories of causes of diabetes
- K3 signs and symptoms of diabetes, including WHO criteria for diagnosis
- K4 normal and abnormal blood glucose and HbA1c values
- K5 how to monitor glucose levels, HbA1c, blood pressure
- K6 typical progressive patterns of diabetes
- K7 the investigations required to exclude causes of erectile dysfunction other than diabetes
- K8 the treatments for erectile dysfunction
- K9 psychosexual functioning and the theories and techniques of psychosexual counselling
- K10 the importance and effects of patient education and self management
- K11 the psychological impact of diabetes
- K12 how to work in partnership with patients and their partners
- K13 the social, cultural and economic background of the patient/carer group
- K14 the impact of nutrition, particularly carbohydrates, on diabetes
- K15 the impact of physical activity on diabetes
- K16 the effects of smoking, alcohol and illicit drugs
- K17 the medications used to manage diabetes
- K18 the long term complications of diabetes and when they are likely to occur
- K19 the physiological and psychological impact of diabetes on sexual functioning
- K20 relevant professional guidelines, standards and codes of professional conduct
- K21 the law and good practice guidelines on consent
- K22 your role in the healthcare team and the role of others
- K23 local guidelines on diabetes healthcare
- K24 local referral pathways
- K25 local systems for recording patient information
- K26 audit and quality assurance systems
- K27 sources of practitioner and patient information on diabetes
- K28 contact details of local and national support groups
- K29 sources of information and support about psychosexual functioning
- K30 how individuals can access local facilities for exercise and physical activity, education and community activities

SFHDiabED02

Assess a man with diabetes for erectile dysfunction

Additional Information

External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB6 Assessment and treatment planning

SFHDiabED02

Assess a man with diabetes for erectile dysfunction

Developed by	Skills for Health
Version number	1
Date approved	June 2010
Indicative review date	June 2012
Validity	Current
Status	Original
Originating organisation	Skills for Health
Original URN	Diab ED02
Relevant occupations	Health, Public Services and Care; Health Professionals; Healthcare and Related Personal Services
Suite	Diabetes
Key words	diabetes