

## Sexual Advice Association

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### Frequently Asked Questions

**Here are some of the most frequently asked questions sent to our website, with a sample of some of the answers. These support the information given in our Factsheets, which can be found on our website [www.sda.uk.net](http://www.sda.uk.net)**

**We would urge you, if you have a problem, to discuss it with a doctor, even though you could find it embarrassing to talk about sexual complaints. So often, the problem can be easily solved. There are also other agencies to help, which are listed on our website.**

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**I'm female, aged 55 and it's painful to have sex. Is there anything I can do?**

Yes. The condition is called atrophic vaginitis and is common after the menopause and is due to falling oestrogen levels. You may find water-based lubricants or oestrogen creams, pessaries or tablets helpful. We have a [Fact sheet](#) about this.

**I'm 65 and my husband is 66. We have a loving relationship and he wants to have sex but I have no interest and this is upsetting both of us. My family doctor was amazed to think we should be having sex at our age and I should 'think of England'. I think this is very unfair. Can something be done?**

Yes this is common problem and affects about one in two women. If sex is painful we would suggest trying water based lubricants or oestrogen creams, pessaries or tablets. Alternatively, you can see a psychosexual counsellor. In fact you may need both approaches. For more information we have a [Fact sheet](#) about this.

**I'm 29 and had a good sexual relationship with my first boyfriend. We split up amicably 3 years ago. I now have a new boyfriend and love him very much but sex is not enjoyable and I do not have orgasms anymore. What can I do?**

First you must not be embarrassed to discuss this with your boyfriend as this might be due to problems within your relationship. You may need to see a psychosexual counsellor for sex therapy. It is important to make sure that the sex therapist is qualified and abides by the code of ethics of an appropriate professional body. Look for a therapist who is a member of the Institute of Psychosexual

Medicine ([www.ipm.org.uk](http://www.ipm.org.uk)) or the British Association for Sexual and Relationship Therapy (<http://www.cosrt.org.uk>).

**I am 62, fit and happily married and have had a good sex life for 35 years. I have recently started to have a problem getting an erection. What can I do about this and what is the reason for it? Is it just that I am getting older? I have high blood pressure and am taking atenolol every day.**

The short answer is that impotence (or erectile dysfunction) is easily treated, but you would be well advised to go back to your GP and ask to be changed to a different blood pressure treatment, (which is the most likely cause of your erectile dysfunction - ED). However, you should discuss with your doctor ideally not to be changed to a blood pressure treatment, which contains a nitrate compound. The reason for this is that one of the most effective treatments for ED, Viagra, or one of its siblings, Cialis or Levitra, clash with nitrates. For fuller details see the Fact sheets for Men 4, 5, 6, 7  
If you have not had a physical examination apart from your blood pressure, ask your GP if you can have your cholesterol, blood sugar, and testosterone checked, as impotence can often be an indication that the smaller arteries are furring up, in your heart as well as your penis, or your testosterone is low. You can then be treated appropriately.

**I am 55 and had a heart attack six months ago. I am now very well and back at work and with no chest pain. I would like to go back to having sex with my wife, as we had a very good sex life before I was ill. However, my wife is frightened that if I make love to her, it will bring on another heart attack. Will this happen and if not, how do I convince her?**

An idea of how much energy is used when having intercourse with a long-term partner, measured in metabolic equivalents (METs), the lower range with a regular partner is 2–3 METs and the upper range ('vigorous') is 5–6 METs. Compare these figures with the MET rating for other daily activities:

Walking a mile for 20 mins on the level	3 – 4
Digging in the garden	3 – 5
DIY, wallpapering, cleaning the car and similar	4 - 5
Playing golf	4 – 5
Lifting and carrying objects up to 20 kg	4 – 5

So, if you can do the other activities, you can have sex again. Discuss how you feel with your doctor and use these other activities as a guide to your physical fitness. In terms of convincing your wife talk through with her how you feel too and explain how a healthy sex life can be compared with other levels of exertion in every day activities.

**After I had my heart attack three months ago, I was sent home with blood pressure tablets, a statin for my high cholesterol and either a spray or tablets to suck for chest pain, which I use occasionally. Now I find I cannot get an erection. A friend suggested Cialis (he takes it). Is it OK for me?**

No, not if you have to use your spray (or put a tablet under your tongue) for the pain. Both contain nitrates, which clash with Cialis (as well as Levitra and Viagra) and make your blood pressure fall severely. If you want to return to having sex, you should ask your doctor for a different treatment for your erection problems other than Cialis, Viagra or Levitra, or, alternatively, you can get tablets, which will control your chest pain and blood pressure without using nitrates, and then you can use Cialis.

**I am 18 and have never had sex before. Last weekend I tried to have sex with my new girlfriend, but I went soft before I got in. She laughed at me and when I tried again the next night and again last night, I couldn't even get hard. What's gone wrong? I am very worried that something serious had happened to me but when I tried masturbating, that was OK. Will I ever be able to make love to her? I like her very much but I think she thinks I am not a man, or that I am gay. PLEASE help. What can I do?**

You are not alone. This problem happens very, very frequently in young (and often in not-so-young) men and it is not only humiliating to a man but completely demoralising. Fortunately, there is rarely anything physically wrong at your age. It usually occurs because of first night nerves. You get extremely anxious the second time round, watching yourself to see if you are going to be able to perform – and of course, you can't. It doesn't help if your partner laughs at you (though this may just be because of her anxiety). The best and quickest way of getting help is to go to see your GP. Don't be too embarrassed, as he or she will have heard the same problem many times before. You would benefit from something like one of the Viagra family (e.g. Viagra itself or Cialis or Levitra), although Cialis would appear to be better in your case (see [Fact sheet 5](#)) as it lasts longer. DO NOT be tempted to get anything off the Internet as four times out of five, they are fake tablets.

**I am 24 and I have a tiny penis when soft. My erection is 5.5 inches and when I look at porn, the men are very much bigger than me. Can you tell me how I can get a bigger erection? What exercises can I do and which treatment should I take? Is it possible to have an operation to make my erection bigger? I am ashamed to undress in front of people at the gym, although my girlfriend says I am all right. I have tried a pump, which has not made any difference, nor have herbal drugs**

Many men worry a great deal about their size, and most think that they are under endowed, so the facts are important. A smaller soft penis enlarges by a greater percentage volume than a larger one. The length of the flaccid penis varies between 5– 9.5cm (2–4 inches), and much depends on the temperature. The size of erections in men in the UK varies from 12–17.5cms or just under 5 inches to 7 inches, with an average of 16 cm or just over 5.5 inches.

Of course there will be a few either side of the normal range. The important thing is to remember that looking down on the penis gives a foreshortened view and therefore a false idea of its length. Magazine photos are carefully angled to increase size, and models for porn films are chosen for their

size of thier endowment. Remember also that the vagina is only 4 inches (10cm) long and that the important, sensitive areas in a woman are the lips (labia), clitoris and the first inch inside.

Operations to lengthen the penis are not successful and cause a lot of expensive problems. Unfortunately none of the various bits of apparatus or drugs help other than very temporarily. However, you are fine and normal, so there is no need to be ashamed of your endowment. You are OK and fortunately, your girlfriend is happy too. Just relax.

**I have a smelly cheesy stuff under my foreskin. Have I got cancer, or is it an infection?**

This cheesy stuff, which is called smegma, is naturally produced by glands around the knob or glans of the penis, and in uncircumcised men can collect underneath the foreskin. If it can be washed away, then it is not cancer. The whole area under the foreskin needs to be washed regularly. Otherwise, it can become painful to remove, and eventually can cause an ulceration. It is not due to infection, and women also produce it, in the folds of their labia or lips, if they do not wash enough.

**I am 28 and am going home shortly because my parents have arranged a marriage for me to a girl I have never seen. I do not know who they will choose but I am very worried about whether I can have intercourse on my marriage night. I have had sex regularly with my UK girlfriend while I have been in the UK, but it has become difficult recently, as I have been worrying about my marriage and often I cannot get a decent erection, although I can masturbate without difficulty. Why is this happening to me? Do you think it must be because I have masturbated too much when I was younger and have lost a lot of vital energy? What can I do?**

This is not because you have masturbated too much. You cannot masturbate too much because the body gets tired after a number of ejaculations in a day and then you cannot get either an erection or an orgasm. You won't lose any more vital energy by masturbating than you would by having sex. If you are really so worried, especially about her family's reaction, I would suggest that you ask your GP for some Viagra, Cialis or Levitra to take home with you. You need to take a tablet on the night of your wedding. They all work well, within a couple of hours, and Viagra and Levitra will last for 4 – 6hours, while Cialis will last for the next day or two days. Once you have settled down together (and remember she will be as worried and frightened as you will be, so be kind and thoughtful and don't think only of yourself), then you will be unlikely to need any more tablets.

**I have been having/diagnosed with erection problems for about four years. I feel that I have just been given pills by my doctor to tackle the problem. My wife doesn't like me taking the pills and neither do I, because I am sure they must have some lasting damage to my heart. But I don't understand what the cause of my erection problems is. Is it a physical problem (I do have slightly raise cholesterol levels) or psychological? I consider myself relatively fit. I can get morning erections twice or three times a week. My wife was unhappy about abandoning her career when we had our children now four under 8 years. We also had a lot of other, family, problems which were quite stressful. My wife doesn't want me to take Cialis as she feels it enhances libido and I think she feels this is all down to me having no desire for her – which is far from the truth. What can I do?**

You first need a physical examination - have your blood pressure checked (which I assume you have already done), and you need a fasting blood test to check your cholesterol and blood sugar. I'm sure your GP would agree to these. In some people, a failure of erection can suggest too high a cholesterol or early diabetes. Once you have ruled these out, you have to assume it is psychological, which you obviously already suspect it might be, with your ability to get an erection varying according to circumstances, and the fact that you get good early morning erections.

I don't think this is a sexual problem; it seems much more a relationship problem between you and your wife, and the sex is a casualty. What you need is not a sex therapist but a relationship counsellor, who is not going to concentrate on sex but on what is happening between you both. For links to various addresses for help, see the [Links page](#).

**I am 51 and starting to suffer with the problem of gaining and maintaining an erection during love making. I am currently being treated for hypertension and take lisinopril 10mg an ACE inhibitor drug which controls my blood pressure to an average of 130/85. Would it be safe for me to take Viagra whilst using the lisinopril?**

Yes, it is quite safe to take Viagra or the other drugs Cialis and Levitra, as long as you don't also have a nitrate spray or tablets, for angina, or nicorandil. Otherwise the tablets are quite safe. For details of the drugs, see [Fact sheet 5](#), for Men.

**I had a radical prostatectomy for cancer of the prostate last year. I now can't get an erection. Sex is very important to us. What can I do?**

I suggest you go to your GP and discuss the options, as there is almost certainly something you can use to get back to regular intercourse. The first option would be tablets, with a choice of Levitra 20 mg, Cialis 20 mg or Viagra 100 mg, which are at their maximum dose. Use each regularly for half a dozen times before moving on to the next (after visiting your GP for a different tablet) if it fails you. If tablets are unsuccessful, a second option would be the injection into the penis, the thought of which makes tears come to the eyes of the strongest man, but which I assure you most men using it find quite painless! It's an extremely successful method. A further alternative is the vacuum pump. This can also be very successful, although it takes a while to get used to. If none of these options work, then there is the inflatable prosthesis, put in surgically along the shaft of the penis. This is rarely available on the NHS, but the other treatments are. See our Factsheets for Men: [4](#), [5](#), [6](#) and [10](#).

June 2011



Charitable Company registered in England and Wales. Company registration number 04997095. Charity registration number 1104691.  
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