

## Between the Sheets...

November 2019

This column provides the platform for experts in the field to help men and women by providing answers to questions about sexual health and intimacy challenges that can result from prostate cancer treatment.

This column was compiled with the help of Dr. Jeffrey Albaugh, Director of Sexual Health at NorthShore University HealthSystem and at Jesse Brown VA Medical Center in Chicago, IL. Dr. Albaugh is a funded researcher, a board certified advanced practice urology clinical nurse specialist, and a board certified sexuality counselor. In addition to his many publications in peer reviewed journals and chapters in books on sexual dysfunction, Dr. Albaugh published *Reclaiming Sex and Intimacy After Prostate Cancer Treatment*. He has been quoted in media and publications as an expert in the treatment of sexual dysfunction, and is a member of the Us TOO Board of Directors.

### QUESTION FROM PROSTATE CANCER SURVIVOR:

*I had brachytherapy 18½ years ago but about two years ago started having some ED symptoms. My urologist gave me 20mg of Cialis but it did nothing. I found a supplement with Tongkat extract (has heavy B6 and other extracts) that seemed to help for a while but not anymore. Is there anything to the advertisements I hear about supplements?*

### RESPONSE FROM DR. JEFFREY ALBAUGH:

*Thank you for your excellent question and I am often asked about complimentary treatments for erectile dysfunction including herbs. There is not good definitive evidence to support Tongkat extract to treat erectile dysfunction and, even more importantly, many supplements such as the ones you are asking about may contain testosterone, testosterone enhancing products, or other products which may be harmful to you as a prostate cancer survivor. I would not recommend taking this based on the available science. There are many supplements out there that claim to improve erectile function but be very careful with what you put in your body as many of these supplements are not regulated and contain multiple products. Often the claims made for the supplements are not true and some supplements may even be harmful. When I want to learn more about the evidence to support supplements, I turn to my friend and, in my opinion, the leading expert on urology supplements, Mark Moyad, MD, MPH. I carry his book, *The Supplement Handbook: A Trusted Expert's Guide to What Works & What's Worthless for More than 100 Conditions* on my tablet and feel it is an excellent resource on supplements. Single ingredient supplements are lower in cost and have more research evidence to support them, but many supplements lack solid research to support their effects. I have not found any supplement that works as well as the FDA approved treatments for erectile dysfunction. Having said that, there are a few that have some evidence to support a positive effect on erectile function in men with mild to moderate erectile dysfunction. There is some consistent positive data for Korean red ginseng (*Panax ginseng*) and heart healthy lifestyle changes for erectile dysfunction; and criticism has been proposed of the current erectile dysfunction guidelines for NOT including the evidence for both *Panax ginseng* and heart-healthy lifestyle changes in clinical guidelines (Moyad & Park, 2012). In terms of complimentary therapies for improving erectile function, I do believe that the greatest complimentary therapy supported by research continues to be a low fat, low cholesterol, plant-based diet, along with exercise and weight control (Collins, et al., 2013; Esposito, et al., 2009; Esposito, et al., 2004). Staying in top physical shape is the most important thing you can do for your heart and your erectile health. In a 2008 systemic review of red ginseng for treating erectile dysfunction, seven randomized controlled trials were examined and the collective evidence supported the effectiveness of red ginseng in the treatment of erectile dysfunction (although the sample size from all trials and methodology quality were too low to draw definitive conclusions and better studies are needed) (Jang, Lee, Shin, Lee, & Ernst, 2008). A 2012 published multicenter, placebo-controlled, double blind study of 119 showed improvement in erectile function, with no side effects (except one case of mild stomach upset) and no safety issues with changes in hormonal or cholesterol markers were noted (Choi, et al., 2012). There is also limited evidence to support L-citrulline. L-citrulline is an amino acid normally made in the body that converts to L-arginine (also an amino acid from the body). L-arginine improves blood flow by creating nitric oxide which helps dilate blood vessels. L-citrulline is taken at lower doses than L-arginine and the high doses needed for L-arginine raise concerns with toxicity. In a small study of only 24 men, half the men with mild to moderate erectile dysfunction had improvement in erection hardness with L-citrulline with no reported adverse effects (Cormio, et al., 2011). The authors conclude it doesn't work as well as PDE-5 inhibitors (sildenafil, vardenafil, avanafil and tadalafil)*

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*and further research is needed for L-citrulline. If you are considering a supplement, I would recommend looking at the available research to understand further the positive effects it may have, any side effects reported, and also dosing information.*

*I think it is most important for you to work closely with an erectile dysfunction urologic expert provider to determine the best treatment for your erectile dysfunction. There are multiple evidence-based treatments for erectile dysfunction including oral agents, the vacuum device, intraurethral suppositories, penile injections, and the penile implant. Often men are not taking their medications properly and this can make a difference in response to medications. You need to make sure you have taken it properly to produce maximum effects under the direction of a urologic healthcare provider. If the medication is still not working after multiple attempts of taking the medication properly for maximum effect, it may be time to explore the other evidence-based erectile dysfunction treatments under the supervision of an expert provider. All treatments have pros and cons, but most men who are willing to work with the various treatments are able to find something that works for them.*

Choi, Y. D., Park, C. W., Jang, J., Kim, S. H., Jeon, H. Y., Kim, W. G., . . . Chung, W. S. (2012). Effects of Korean ginseng berry extract on sexual function in men with erectile dysfunction: a multicenter, placebo-controlled, double-blind clinical study. *International Journal of Impotence Research*, 25(2), 45-50. Retrieved from [http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list\\_uids=23254461](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list_uids=23254461)

Collins, C. E., Jensen, M. E., Young, M. D., Callister, R., Plotnikoff, R. C., & Morgan, P. J. (2013). Improvement in erectile function following weight loss in obese men: the SHED-IT randomized controlled trial. *Obes Res Clin Pract*, 7(6), e450-454. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/24459689>

Cormio, L., De Sisti, M., Lorusso, F., Selvaggio, O., Mirabella, L., Sanguedolce, F., & Carrieri, G. (2011). Oral L-citrulline supplementation improves erection hardness in men with mild erectile dysfunction. *Urology*, 77(1), 119-122. doi:10.1016/j.urology.2010.08.028

Esposito, K., Ciotola, M., Giugliano, F., Maiorino, M. I., Autorino, R., De Sio, M., . . . Giugliano, D. (2009). Effects of intensive lifestyle changes on erectile dysfunction in men. *Journal of Sexual Medicine*, 6(1), 243-250. Retrieved from [http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list\\_uids=19170853](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list_uids=19170853)

Esposito, K., Giugliano, F., Di Palo, C., Giugliano, G., Marfella, R., D'Andrea, F., . . . Giugliano, D. (2004). Effect of lifestyle changes on erectile dysfunction in obese men: a randomized controlled trial. *JAMA*, 291(24), 2978-2984. doi:10.1001/jama.291.24.2978

Jang, D. J., Lee, M. S., Shin, B. C., Lee, Y. C., & Ernst, E. (2008). Red ginseng for treating erectile dysfunction: a systematic review. *British Journal of Clinical Pharmacology*, 66(4), 444-450. Retrieved from [http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list\\_uids=18754850](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list_uids=18754850)

Moyad, M. A., & Park, K. (2012). What do most erectile dysfunction guidelines have in common? No evidence-based discussion or recommendation of heart-healthy lifestyle changes and/or Panax ginseng.

*Asian Journal of Andrology*, 14(6), 830-841. Retrieved from [http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list\\_uids=23001440](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list_uids=23001440)

You can access the new edition of my book or download a free copy of my original book at [www.drjeffalbaugh.com](http://www.drjeffalbaugh.com).

Watch Dr. Albaugh's presentation on sexual health and intimacy from the *Prostate Cancer Pathways for Patients and Caregivers* event recorded at NorthShore University HealthSystem in Skokie, IL on November 3, 2018 at <https://www.youtube.com/watch?v=Hiq0dDEb1I0&t=4483s>.

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Do you have a question about sexual health or intimacy? If so, we invite you to send it to Us TOO. We'll select questions to feature in future *Between the Sheets* columns.

**Please email your question to: [ustooBTS@ustoo.org](mailto:ustooBTS@ustoo.org)**

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Us TOO International  
Between the Sheets  
2720 S. River Road, Suite 112  
Des Plaines, IL 0018