

# THE GHOST OF ERECTILE DYSFUNCTION: A CHALLENGE FOR BRAZILIAN PUBLIC HEALTH

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## INTRODUCTION

Since 2008, with the publication of the National Men's Health Policy, the Brazilian public health system has formally started preventive health actions that consider the male population and its characteristics. The purpose of this study is to describe the origins and treatments of erectile dysfunction and how the Brazilian national health care system deals with this issue considering the social representation of masculinity in the country.

## METHODOLOGY

Literature review with a selection of scientific articles from the following virtual data base libraries: LILACS, IBECs, MEDLINE, The Cochrane Library and SciELO. The research mostly focused on articles that were published within five years of this study (2007-2012) and on articles associated with men's sexual health, erectile dysfunction, the social representation of masculinity, and the public services specialized for this disorder. The other research material, such as books and articles from Brazilian newspapers published, were selected for a better understanding of the information given by this study.

## RESULTS AND DISCUSSION

Erectile dysfunction can occur as a result of physical or psychological issues, or a combination of both. It can be physically treated with oral pills, urethral suppositories, penile injections, creams, vacuum devices, and prosthesis. For psychological and mixed etiology, treatments are offered in sexual psychotherapy, group psychotherapy, couple and individual psychotherapy, and virtual psychotherapy. Associating both treatments creates better results. Although there is a specific health care center for men in São Paulo, there is a lack of demand by the patients that is often associated with a cultural representation of masculinity. It usually reinforces the idea that a real man does not have to take care of his own health, that he needs to be flawless, infallible, and an authority on sex, that the size of his penis and its erection represent power and superiority. Thus, when there is an episode of impotence, instead of seeking help, men choose denial as a coping mechanism to maintain psychological stability, self-esteem, and social dignity.

## CONCLUSION

Public health policies could use primary care practices in their communities to influence men's own perception of masculinity and its relation within society, deconstructing the idea of men as an invincible human being. Providing access to health services in the workplace, increasing the flexibility of health center's operating hours, and addressing erectile dysfunction in conjunction with other common disorders, like diabetes, can be used as instruments of self-awareness and prevention of risky behaviors that can lead to other diseases.

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