RELATIONSHIP BETWEEN SEXUAL FUNCTION AND OBESITY

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Aim: to study the characteristics of clinical and laboratory parameters in obese men. Materials and Methods: the study included 31 men aged 30 to 55 years. At baseline, all patients had a diagnosis of obesity. For the clinical assessment this questionnaires were used: IIEF-5, AMS. As a result of the survey, patients were divided into three clinical groups. The 1-st group consisted of 18 patients with mild erectile dysfunction (ED), 2-nd - 8 patients with moderate ED and 3 group 5 people with severe ED. Findings: all patients had a significantly greater degree of abdominal obesity: waist circumference (WC): 123,5±15; 129,6 ±26,6 and 132,2±9,2 cm and body mass index (BMI): 40,1±9,9 and 40,25±9,85 and 41,84±5,84 respectively. We have identified a correlation that with increasing waist circumference and body mass index progresses severity of erectile dysfunction. Leptin levels were significantly higher in all patients: 41,66±19,73; 47,5 ±20,35; 42,57±0,3 ng/ml. In all groups were found hypertriglyceridemia with most severe in the third group: 3,68±2,44; 2,2±0,8; 4,3±0,9 mmol/l. In assessing the results of hormonal studies we found that the lowest total (TT) and free testosterone (FT) and the highest estradiol (E) were in the group with severe erectile dysfunction: TT: 2,98±1,78, 2,8±3,01, 1,94 ±0,58 ng/ml; FT: 65±42,3, 61±49,1, 38±13 pg/ml; E: 32,9 ± 18,1, 42,8 ±28,8, 50,44±5,4 pg/ml respectively. Conclusion: analysis of the data showed that obesity is associated with erectile dysfunction. The increase in BMI, WC, triglycerides affect sexual function of obese men.