Men’s Health
Urologic and Sexual Function

Why is bladder control important for sexual activity?

Ninety to ninety-five percent of people with Spina Bifida (SB) have neurogenic bladder and bowels, and many will have difficulty attaining continence. Management of continence is very important because continence is important for good hygiene and may affect the opportunity to find a partner who is interested in having sexual contact with you. For men with SB, bladder function is inseparable from sexual function. Some of the same nerves that control urinary function also are important in sexual function. The lower the level of the SB lesion, the more likely that there will be normal nerve function and therefore, normal sexual function. Higher level lesions may be associated with sexual dysfunction, and may require medical advice or support.

Some males with SB have difficulty getting or maintaining an erection. This is called erectile dysfunction (ED). Often, satisfactory erections are possible, but may not last long enough to reach orgasm; or ejaculation may be difficult. If orgasm occurs, the semen may not be propelled out because the bladder neck does not close properly; and that could affect the ability to father children.

Can ED be treated?

Although erectile dysfunction (ED) is common in men with SB (as it is with many men in general), most still have normal sexual desire. The good news is that ED is a treatable condition. Some medical options include:

- Oral medication such as sildenafil (Viagra), vardenafil (Levitra), tadafal (Cialis) which regulate blood flow to the penis but still require some form of sexual stimulation to work effectively.
- Penile constriction ring to help maintain an erection.
- Penile vacuum device (an external device to draw blood into the penis.)
- Injection therapy to put medication into the penis to stimulate blood flow.
- Penile prosthesis (internal device that requires surgery)

Can men with SB produce children?

Nearly all men with SB produce sperm and semen that, if they can reach a woman’s egg, can result in pregnancy. At least half of the men with SB lesions lower than L5 can produce children without any medical help. The rates are lower with higher lesions though. Many of the issues that may prevent conception are due to mechanical and anatomical difficulties in conceiving, rather than a lack of fertility. One common problem is orthopedic or anatomic problems that may prevent successful or satisfying sexual positioning. Another issue can be with ejaculation to get the sperm and semen out of the male and into the woman to fertilize the egg. This issue is related to the bladder function, because the bladder neck must close properly during ejaculation to prevent the semen and sperm from going up into the bladder. If this occurs, it is not harmful, but it makes conception difficult. In such cases, there are a variety of assisted reproductive techniques that can result in a successful pregnancy. Consult your clinic about these.
What about sexually transmitted infections?

Men with SB have normal sexual desires like all men. Similarly, sexually transmitted infections (STIs), also called sexually transmitted diseases (STDs) can affect anyone who has sexual activity, because some STIs can occur with or without penetrative sex. Genital, anal or oral contact with an infected person’s genitals (whether male or female) may result in a sexually transmitted condition. The human papilloma virus (HPV) is the most common STI in men and does not always present with signs or symptoms. Certain strains of HPV cause genital warts; but more serious health concerns may be associated with the virus. For this reason, there now exists a vaccine to prevent infection with certain types of HPV. Other serious sexually transmitted infections can occur like: syphilis, gonorrhea, chlamydia, and HIV/AIDS.

Therefore, condoms should be used for any sexual encounter that is not intended to produce a pregnancy. However, condoms will only protect the body parts that are covered: the penis and areas of the partner that are prevented from touching the covered penis and semen. Because more than half of all sexually active adults in the U.S. have HPV or another STI, it is important to have regular check-ups with your urologist, discuss your sexual activities openly with your doctor, and check your genitalia routinely for any changes in the skin such as: lumps, bleeding, sores, thickening of skin, and changes in color or texture. Some problems, both sexually and non-sexually related, can become serious if they are not diagnosed early.

Do condoms contain latex?

The slang term for condoms is “rubbers” because most condoms contain natural rubber latex. That can be a serious issue for people with SB because many have serious allergies to latex. Fortunately, there are non-latex condoms that are safe for all. The most common materials for non-latex condoms are polyisoprene, and polyurethane. Lamb or sheep skin condoms can also be used, but they do not reliably protect against STIs. Some men say that polyisoprene condoms have better feel and are less likely to break (which is important for protection).

Why don’t men with SB have sex as often as they could?

Although most men with SB think about sex and would like to have a sexual partner, not all achieve that point in their life. This is often due to:

- Urinary and bowel incontinence
- Difficulty with erections and/or positioning for sexual activity
- Delay in receiving sexual education
- Lack of social interaction/opportunity
- Low self esteem
- Lower overall neurologic function, which may be due to hydrocephalus
- Lack of independence from parents or caregivers

It would be remiss not to add that the experience of sexuality and fatherhood are enhanced, and in most cases, preceded by a loving, caring relationship which includes acceptance and understanding by both partners. Honesty and open discussion of your sexual experiences as well as your partner’s, is necessary for a healthy, trusting relationship (even if you never have a sexual encounter).

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