

I'm human



Dr sebi erectile dysfunction

ED pills can be obtained only with a prescription from a licensed healthcare professional. You can either visit a doctor's office or use telemedicine companies that partner with doctors to prescribe ED pills online. Roman, founded in 2017, is a telemedicine brand that offers healthcare services like scheduling appointments and filling prescriptions for ED pills through its website. It offers both brand-name and generic versions of PDE-5 inhibitors, including oral pills and chewable tablets. Hims is another telemedicine website founded in 2017 that offers both brand-name and generic ED pills through its website. You can attend virtual doctor's appointments and fill your prescriptions for ED pills all in one place. BlueChew is a telemedicine platform that offers chewable ED pills using a subscription model. It focuses on chewable versions of common PDE-5 inhibitors. Lemonaid, founded in 2013, is a telemedicine that offers online medical treatment for over 30 conditions, including sexual health treatments for ED. Lemonaid has an enormous network of healthcare professionals who can help you get treatment for ED and other conditions. You don't always need to pay full price for PDE-5 inhibitors. Discount and coupon programs from companies like Optum Perks are available, which can often save hundreds of dollars on regular prescriptions of PDE-5 inhibitors using these coupons. Interventions for treating erectile dysfunction and premature ejaculation were reviewed in several studies published in Sex Medicine (2019) and Translational Andrology and Urology (2020). The diagnosis of vascular erectile dysfunction was also overviewed in a study from Transl Androl Urol (2020). The impact of obesity and metabolic syndrome on the male reproductive system was discussed in an article from Am J Reprod Immunol (2019). The role of nitric oxide in penile erection was examined in Expert Opin Pharmacother (2001). The International Index of Erectile Function (IIEF) was reviewed in Int J Impot Res (2002), while the IIEF-5 was appraised in J Psychosexual Health (2020). Novel emerging therapies for erectile dysfunction were discussed in World J Mens Health (2020). Medicinal plants as a potential source of phosphodiesterase-5 inhibitors were reviewed in J Ethnopharmacol (2021). Botanical medicine and natural products used for erectile dysfunction were examined in Sex Med Rev (2020). A review of current and emerging therapeutic options for erectile dysfunction was published in Med Sci (2019). The psychoactive effects of yohimbine, Maca, horny goat weed, and ginkgo biloba were discussed in Biomed Res Int (2014). The efficacy and safety of common ingredients in aphrodisiacs used for erectile dysfunction were reviewed in Sex Med Rev (2020). Finally, the cost-effectiveness of complementary and alternative medicine (CAM) was examined in a systematic review published in BMC Complement Altern Med (no date provided). Evidence suggests that complementary and alternative medicines (CAM) are used during fertility treatment, with some studies exploring their potential benefits for male sexual dysfunction. A systematic review found that CAM usage is common among patients undergoing fertility treatment. Additionally, recent studies have investigated the aphrodisiac properties of certain herbs in managing male sexual dysfunction. Several clinical trials have examined the efficacy and safety of various herbal supplements for treating erectile dysfunction (ED). For instance, a study evaluating Korean red ginseng found it to be effective in improving ED symptoms. Similarly, another trial discovered that combining vitamin E and ginseng extracts improved ED outcomes. A review analyzed popular online supplements marketed for ED and found that many contain ingredients without scientific backing. Another systematic review examined the ingredients in these supplements and concluded that most lacked sufficient evidence to support their claimed benefits. A study was conducted to examine the effectiveness of various natural supplements in improving erectile function (EF) and lipid profiles. The research involved a series of clinical trials that tested the efficacy of different compounds, including Pycnogenol, Prelox, French maritime pine bark extract, Tribulus terrestris, and others. Key findings from these studies revealed: 1. ****Improved EF:**** Supplements such as Pycnogenol, Prelox, and Tribulus terrestris demonstrated significant improvements in erectile function. 2. ****Enhanced Lipid Profile:**** Certain supplements, including Pycnogenol and French maritime pine bark extract, showed positive effects on lipid profiles. These findings suggest that specific natural compounds may have therapeutic potential for improving EF and lipid profiles in patients suffering from erectile dysfunction. A study on the effects of L-arginine on sexual function in men with type 2 diabetes found that a combination of L-arginine and yohimbine hydrochloride could be an effective oral therapy for erectile dysfunction. Another study discovered that a novel combination of L-arginine glutamate and yohimbine hydrochloride was safe and efficient in treating erectile dysfunction. Additionally, research has shown that a combination of yohimbine and L-arginine can be used to treat erectile dysfunction, with improved efficacy and safety compared to placebo. Furthermore, studies have also explored the effects of acupuncture on psychogenic erectile dysfunction and found that it could be an effective treatment option. Other studies have investigated the impact of lifestyle changes on erectile dysfunction in obese men and found that intensive lifestyle changes could improve sexual function. Moreover, research has been conducted on the effects of warm needling moxibustion for erectile dysfunction and found that it could be a promising treatment option. Additionally, studies have explored the effect of nut consumption on erectile and sexual function in healthy males and found that it had a positive impact. Finally, research has also investigated the impact of aerobic physical activity on endothelial function in patients with erectile dysfunction and found that it improved endothelial function, a bunch of clinical trials and studies on treating erectile dysfunction with various natural remedies were conducted in different years and locations. These included pomegranate juice, ficus religiosa linn., buten superba, ashwagandha, cappa for men, myoinositol and folic acid combo, niacin, dehydroepiandrosterone, saffron gel, ginseng extracts, red ginseng, and a combination of these natural substances. Studies have investigated the efficacy of Korean Red Ginseng (KRG) in treating erectile dysfunction (ED). Choi et al. found KRG to be effective in improving ED symptoms in a multinational approach. Kim et al. also reported positive results using KRG on vasculogenic impotent patients. Borrelli et al.'s systematic review and meta-analysis supported the use of herbal dietary supplements, including KRG, for ED treatment. Additionally, Choi et al. observed changes in penile blood flow after oral medication with KRG in ED patients. In terms of interactions between KRG and therapeutic drugs, Choi et al. conducted a study on the effects of ginseng on drug interactions. He et al. compared the differences between White and Red Ginseng regarding variations in ginsenosides and immunomodulation. Hyun et al. examined the physiological and pharmacological features of non-saponin components in KRG. Furthermore, research has explored the use of Pycnogenol(R), a French maritime pine bark extract, in metabolic syndrome and related disorders. Gulati reported positive results using Pycnogenol(R) for metabolic syndrome treatment. Rohdewald reviewed the clinical pharmacology of Pycnogenol(R). Schoonees et al.'s Cochrane review evaluated the effectiveness of Pycnogenol(R) for chronic disorders. Finally, studies have examined the antioxidant properties of natural source antioxidants using ESR spectrometer systems. Noda et al. studied hydroxyl and superoxide anion radical scavenging activities. Cossins et al. evaluated vitamin C regeneration and reactivity. Bayeta et al.'s research demonstrated Pycnogenol's inhibitory effects on inflammatory mediator generation in macrophages. Cho et al. investigated the effect of bioflavonoids from Pinus maritima bark on proinflammatory cytokine production. Pycnogenol, a plant extract, has been shown to inhibit the activation of nuclear factor kappa B and adhesion molecule expression in human vascular endothelial cells when exposed to tumor necrosis factor-alpha. This was found in a study published in Cell Molecular Life Sciences in 2000. A scientific monograph by the American Botanical Council in 2019 further supports Pycnogenol's properties, highlighting its potential benefits for vascular health. Additionally, research by Stanislavov and Nikolova in 2003 explored the combination of Pycnogenol with L-arginine to treat erectile dysfunction. Other studies have focused on Tribulus terrestris, a plant used in traditional medicine. Chhatre et al. (2014) provided a phytopharmacological overview of Tribulus terrestris, while Zhu et al. (2017) reviewed its pharmacological activities and phytochemistry. A randomized double-blind study by Santos et al. (2014) investigated the effectiveness of Tribulus terrestris in treating erectile dysfunction. The ethnobotany and ethnopharmacology of Lepidium meyenii (Maca), a plant from the Peruvian highlands, were examined by Gonzales GF (2012). Beharry and Heinrich (2018) questioned the hype around Maca's reproductive health claims. Systematic reviews have been conducted on the use of Maca for improving sexual function. Research has also explored the combination of extracts from Lepidium meyenii and Allium tuberosum in addressing erectile dysfunction. Additionally, studies have investigated the role of L-arginine supplements in treating this condition. Recent studies have investigated the efficacy of various treatments for erectile dysfunction (ED). A double-blind, randomized, placebo-controlled study found that oral administration of L-arginine, a nitric oxide donor, improved ED symptoms in men. Another study discovered that a supplement containing arginine and citrulline enhanced male sexual function in healthy Japanese individuals. Additionally, research has explored the role of acupuncture in pain management, with some studies suggesting its potential benefits. A systematic review on the topic concluded that acupuncture can be an effective treatment for various conditions, including ED. Dietary changes have also been found to impact ED. The Mediterranean diet, which emphasizes whole grains, fruits, and vegetables, has been shown to improve sexual function in people with type 2 diabetes. Similarly, a low-energy diet and a high-protein low-fat diet have both been linked to improved ED symptoms. Antioxidants have also been studied as potential treatments for ED. Research suggests that these compounds may help regulate fertility in aging males. Furthermore, lifestyle modifications such as physical exercise have been found to have a positive impact on ED. Sexual function and testosterone in obese men. J Sex Med. 2013;10(7):1823-1832. [PubMed] [Google Scholar] Inclusion and exclusion criteria for eligibility: Inclusion criteria: Randomized controlled trials in patients diagnosed with ED Exclusion criteria: Animal studies, in vitro studies, in silico studies Sole use of traditional or herbal medicine as intervention in at least one group Prospective and observational studies, case reports, meta-analysis and narrative reviews, conference abstracts and proceedings Articles reporting the IIEF Non-English language Erectile dysfunction—defined as difficulty in getting or maintaining an erection firm enough for sex—is a common issue. Research suggests that 50 million U.S. men have erectile dysfunction. The issue becomes more prevalent during aging, impacting 9% of men between 40 and 44 years old, and 56% of men over the age of 65. The causes of erectile dysfunction are wide-ranging, including health issues and underlying psychological issues. Erectile dysfunction is treatable, with various options available for individuals affected by this condition. ED can occur if there is insufficient blood flow into the penis or if the penis cannot trap blood during an erection. It can also happen when nerve signals from either the brain or spinal cord do not reach the penis. This definition is subjective because it depends on what one considers "satisfying pleasure." Another way to view ED is as a constellation of multiple conditions, as erections require multiple pathways in the body to work well. If any part of this process does not work, an erection may not occur. ED is a common condition, especially among middle-aged and older men. It is more prevalent among individuals with comorbidities, such as high blood pressure, diabetes, high cholesterol, and obesity, among others. Potential causes of erectile dysfunction include: Aging High blood pressure High cholesterol Diabetes Cardiovascular disease Obesity Pelvic trauma, such as from radiation or surgery Nerve dysfunction Brain or spinal injuries Abnormal hormone levels Medications Smoking Drinking Emotional issues, ED can be an early warning sign for cardiovascular disease due to shared risk factors such as high cholesterol, blood pressure, and diabetes. Certain medications like antidepressants, diuretics, and beta blockers may also contribute to ED. Depression is a significant factor in ED, with individuals being 40% more likely to experience it. A healthcare provider will assess the condition by reviewing medical history, conducting physical exams, and ordering lab tests if necessary. This includes evaluating vascular health, psychiatric history, substance use, and erectile functioning through tests like penile Doppler. Treatment options include lifestyle changes, such as exercising regularly, quitting smoking, and maintaining a healthy diet, followed by more advanced treatments like medications or surgery. Dr. Houman explains that there are various treatment options for erectile dysfunction (ED), ranging from easy to complicated. Medications like phosphodiesterase type-5 inhibitors are commonly prescribed in the U.S., with an overall success rate of about 76%. If medications aren't effective, injection therapy using papaverine can be explored. This involves injecting a substance into the penis every time an erection is desired. Other options include vacuum erection devices, which create pressure around the penis to pull blood in and maintain an erection. However, this method can cause discomfort and bruising. Penile implants are also available as a surgical procedure, typically used when other treatments aren't successful. This involves inserting a pump into the scrotum that inflates and stiffens the penis. Dr. Houman emphasizes the importance of seeking treatment for ED, advising individuals to see a doctor as soon as possible. Dr. Lundy agrees, encouraging people not to feel nervous about discussing their issues with a medical professional. He suggests doing some research to identify trusted healthcare professionals. The sexual health landscape underscores the significance of addressing both premature ejaculation and erectile dysfunction for comprehensive care. Effective treatments for premature ejaculation, including behavioral techniques, medications, and counseling, bring hope and improved quality of life, emphasizing the importance of professional consultation for those dealing with sexual health concerns. Like erectile dysfunction, premature ejaculation's treatment focuses on enhancing sexual function and relationship dynamics, highlighting the interconnectedness of sexual health issues.