SUMMARY

Erectile dysfunction is a common male sexual disorder which is largely underreported by sufferers, and overlooked by healthcare providers. A dysfunctional family relationship is a source of stress that is not salutary to erectile function. The aim of this study was to determine the prevalence of erectile dysfunction and the perceived family functioning of the respondents with erectile dysfunction.

This descriptive cross-sectional study was conducted from September 2013 to December 2013 in the General Outpatient Clinics of the Eku Baptist Hospital. Data was collected from the respondents using an interviewer administered semi-structured questionnaire. The Erection Hardness Score was used to screen for erectile dysfunction and the family APGAR tool was used to assess family functioning. The data collected from one hundred and ninety nine respondents was analysed using the Statistical Package for Social Sciences version 20 and Microsoft excel 2003. A p-value < 0.05 was considered significant.

The age range was 20 to 69 years with a mean of 42.40 ± 14.24 years. The prevalence of erectile dysfunction was 46.2%. Out of this, 12.6% had mild erectile dysfunction, 26.1% had moderate erectile dysfunction, and 7.5% had severe erectile dysfunction. A greater proportion of the subjects (61.3%) had functional families. Erectile dysfunction was more prevalent among men from dysfunctional families (34.7%) compared to men from functional families (11.5%). The association between erectile function and family functioning was significant (X² = 95.079, p < 0.001).

This study highlighted the need for primary healthcare providers to acquaint themselves with screening and managing erectile dysfunction in the context of the family. The Erection Hardness Score is a reliable tool that can be used in busy clinic encounters to screen for and follow up the management of erectile dysfunction.