31 Older Men’s Health

It can sometimes be difficult for men to find information and advice about health issues which affect them, particularly as they get older. This information sheet aims to look at some of the health problems experienced by men, where to get more information and ways to stay well.

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Health services

Men are about half as likely to visit their doctor as women, despite the fact that they are more prone to illness. Surveys have shown that there are a number of reasons for this:

- Traditionally it was harder for working men to get to the surgery, so they tend to be less familiar with the services that are available.
- Some men feel that they should be able to manage their illness on their own without going to the doctor.
- Others feel uncomfortable or embarrassed at having to discuss personal health issues with a doctor or nurse.

However, it is very important that you are registered with a local doctor, even if you don’t have any health problems at the moment. This is in case you need to call a doctor out in an emergency. Or you might want to be referred to another service, for example, chiropody. If you think that you might have a health problem, you should not ignore your symptoms or try to get through it on your own. If you feel uncomfortable about going to the doctor you could consider:

- arranging to see the practice nurse instead of the doctor;
- seeing a different doctor at the same surgery;
- finding out if your surgery runs clinics for men; sometimes called ‘Health MOT’s’, ‘Modern Man Clinics’ or ‘Well Man Clinics’;
- going to a different doctor at a new surgery; or
- taking up the offer of an ‘over 75s check’, if your practice offers one, where you can discuss your health with a practice nurse.

For more information on getting a doctor and other health services, see our information sheet no. 30 Your Health Services: Where to Start.

Conditions

Obviously, men experience a range of illnesses. But in this information sheet we will focus on conditions which particularly affect older men and which are harder to find information about. We will look at how to recognise these illnesses and where to get more help and advice.
Prostate and bladder conditions

The prostate is a small gland, about the size of a walnut, that sits just below the bladder and fits round the urethra like a collar. (The urethra is the tube which carries urine and semen outside the body.) There are three main conditions which affect the prostate.

Benign Prostatic Hyperplasia

Benign Prostatic Hyperplasia (BPH) is an enlargement of the prostate gland. This can be quite common in older men: over half of men over 60 could have BPH, rising to eight out of ten men over 80.

If your prostate is enlarged it will put pressure on your urethra. This will mean you have to pee more often, especially at night, with less notice. Your stream will slow down, and sometimes there will be dribbling afterwards; it can sometimes lead to a sudden inability to pee at all. You should see your doctor immediately if this happens as it is a surgical emergency.

The common symptoms of BPH are:

- needing to urinate frequently, especially at night
- difficulty starting to urinate
- pain when passing urine
- taking a long time to urinate
- a feeling that you have not emptied your bladder
- dribbling afterwards.

If you have any of these symptoms you should visit your doctor. They will usually carry out an examination to check if your prostate is enlarged and run some tests. BPH can be treated by reducing the size of the prostate. This is now often done with drugs and less often with surgery. If you have any pain your doctor may just wish to monitor the enlargement.

Prostatitis

Prostatitis is inflammation or infection of the prostate gland. It is more often found in men under 50 but can affect men of all ages. Symptoms of prostatitis include pain when ejaculating or passing urine and pain deep between the buttocks, in the lower abdomen or lower back.
If you have any of these symptoms you should make an appointment to see your doctor. Prostatitis can be treated with antibiotics, anti-inflammatory drugs or pain killers.

If you have pain and discharge from the penis, you can go to your nearest genitourinary medicine (GUM) clinic. You do not need a doctor’s letter as you can refer yourself to a GUM clinic and your doctor need not know you have been. Alternatively you may wish to consult your doctor. You can find your nearest GUM clinic by phoning NHS Direct on 0845 46 47 in England or Wales (or NHS 24 in Scotland on 0845 42 42 424) or by looking in the phone book.

Prostate cancer
Prostate cancer is diagnosed in about 27,000 men in the UK each year. Most of the men diagnosed will be over 60 but men from the age of 40 can be affected - the risk of getting prostate cancer increases with age.

Prostate cancer is a slow-growing, abnormal growth that starts within the prostate gland. In some men it can remain undetected because it never causes problems in some men; some men with prostate cancer may never get any symptoms at all. At first there are no outward signs that anything is wrong and not all men get the same symptoms. But as the disease develops you may get similar symptoms to BPH.

You may also get:

- lower back pain
- pain in your pelvis, hips or thighs
- difficulty in getting, or keeping, an erection
- unexplained weight loss.

If you experience any of these symptoms you should go to see your doctor straight away. Having the symptoms does not necessarily mean that you’ve got prostate cancer; it is possible that it is a sign of something like BPH. Either way, you should go to the doctor and get it checked out. Your doctor may give you a PSA (Prostate Specific Antigen) test. This is a blood test which helps to diagnose prostate cancer but does not always give a clear-cut answer.

Treatment for prostate cancer depends on the type and size of your cancer as well as your age and general health. It can vary from careful monitoring (many prostate cancers grow so slowly that they do not cause problems) to
radiotherapy, hormonal therapy or surgery. With lengthening life expectancies, most cancers will need treatment.

The Prostate Cancer Charity produces a range of leaflets including one called *The Works*. See the ‘Useful contacts’ section on page 11 for their address and other organisations which can offer more information and advice on conditions which affect the prostate.

Bladder cancer
Bladder cancer is caused by abnormal cell growth in the wall of the bladder. It most affects people over 50 and is much more common in men. It causes bladder pain and blood in the urine.

If you notice blood in your urine, visit your doctor straight away. It does not necessarily mean that you have bladder cancer, but it is important to get it checked.

If your doctor suspects that you have bladder cancer they will usually refer you for a cystoscopy examination. This is where the surgeon passes a tube into the bladder. A cystoscopy can also be used to treat bladder cancer, though treatments vary depending on the type and size of the cancer.

Testicle problems
Hydrocele
A hydrocele is a swelling caused by a build-up of fluid around a testicle. They normally only occur on one testicle but sometimes you can get them on both. Hydroceles vary in size but can get as large as a grapefruit if left untreated.

If you think you may have a hydrocele, or any other kind of swelling, you should visit your doctor to get it checked. Hydroceles can be treated by draining the fluid with a syringe but it is most likely it will be treated with simple surgery. Alternatively if the symptoms are not causing you any problems your doctor may suggest that you simply leave it alone.
**Testicular self-examination**

After a bath or shower, cradle your scrotum in the palm of your hand. Feel the difference between the testicles. It is normal to have one that is larger and lying lower.

Examine each one in turn, and then compare them with each other. Use both hands and gently roll each testicle between thumb and forefinger.

Check for any lumps or swellings, as your testicles should both be smooth. Remember that the duct or tube carrying sperm to the penis, (the epididymis), normally feels bumpy. It lies along the top and back of each testicle. At the same time check your penis for rashes and sores.

**Impotence**

Impotence, or erectile dysfunction (ED), happens when a man has problems getting or keeping a good enough erection to have sex. It gets more common as you get older.

It is now known that in about three-quarters of cases impotence is the result of physical causes. Conditions such as diabetes, cardiovascular disease, Parkinson’s disease, nerve damage as a result of prostate surgery and side-effects from some medicines can all cause impotence. Psychological problems such as anxiety, stress, depression, guilt and sexual boredom can also result in problems maintaining an erection. For many men, however, impotence is caused by a combination of both physical and psychological problems.

Although a lot of older men experience impotence, many do not seek help, despite the fact that it can be successfully treated in many cases. If you are having problems getting or maintaining erections you should visit your doctor, but there are lifestyle changes that you can try which may help.

- Cut down on the amount of alcohol you drink. Too much alcohol can cause ‘brewers droop’ and in the long term reduce your desire to have sex.
- Stop smoking. Nicotine damages the circulation which can affect the blood-flow to the penis.
- Take exercise, such as brisk walks or going to the gym. This will improve your general fitness and circulation, and may help you to relax.
• Think about any areas of stress or worry which may be contributing to your impotence. Make time to do things you find relaxing or learn new ways to relax such as deep-breathing techniques.
• Talk to your partner. Most people find that talking about a problem makes it easier to deal with. Both of you will probably be relieved to have things out in the open. You and your partner can reassure each other that it is no-one’s fault and find ways round the problem.
• Think about what you and your partner want from sex. Older couples often find that they need to adapt their sex lives to physical and emotional changes. For example, after menopause, some women feel discomfort during sex. So you both may need, and enjoy, more foreplay than when you were younger. Indeed, you can have a full and happy sex life that doesn’t involve intercourse at all.

Although these lifestyle changes are likely to improve your general health and protect you from other conditions, they will not help everyone who experiences impotence. If you are still having problems you should see your doctor.

Sometimes men are embarrassed to talk to their doctor about impotence. But if it makes you unhappy, there is treatment available so you shouldn’t just put up with it. There is much more awareness of the condition these days and your doctor will be used to treating patients with impotence. Some doctors have impotence clinics, whilst others may send you to a specialist.

There are different ways of treating impotence depending on the causes. These range from lifestyle changes to drugs such as sildenafil (Viagra). Although Viagra is probably the best known treatment, it is only available on NHS prescription if your impotence is caused by certain conditions. Private prescriptions can be expensive, but there are other kinds of treatment your doctor can discuss with you.

For more information on impotence and the treatments which are available visit your doctor or contact the Sexual Dysfunction Association. See the ‘Useful contacts’ section on page 11 for contact details.

Incontinence
Urinary incontinence is very common. Up to six million people in the UK can’t control their bladder as they would like to. Women are more likely to be affected, but incontinence can also be an issue for men, particularly those who
have prostate complaints or had prostate surgery. Diabetes, urine infections and constipation can also contribute.

Symptoms of bladder incontinence include leaking urine, experiencing an urgent, sudden need to pee, and not always reaching a toilet in time. If you find that you have to get up to go to the toilet in the night, it might be a good idea to sit down to pee, as standing can cause older men to faint. Don’t think that sitting down is unmanly; it’s more relaxed, safer and helps the bladder to empty more easily.

Men can also experience bowel incontinence. Symptoms include difficulty in controlling your bowels and leaking from the back passage.

There is a lot that can be done to improve or even cure incontinence. So if you have symptoms of bladder or bowel incontinence, you don’t have to live with them; make an appointment to see your doctor. They may refer you to a local continence adviser for help and advice or to a surgeon.

For more information on the different types of incontinence, treatments and self-help, see our free advice leaflet *Bladder and Bowel Weakness*. Organisations which can offer advice and support are listed in the ‘Useful contacts’ section on page 11.

**Depression**

As we get older we experience lots of changes which can affect our mood, for example, stopping work and being at home during the day, getting a physical illness which is difficult to cope with or losing friends and family members. It is natural to feel sad about things like this. Sometimes however, this sadness is very intense and can’t be shaken off. You might feel that you haven’t got the energy to find a way out of it. This can be a sign that you are experiencing depression.

Common symptoms of depression include loss of appetite, changes in your sleep pattern, concentration problems and poor memory, lack of interest in sex and low energy levels.

Surveys have shown that men are just as likely to suffer from depression as women, but are less likely to seek help. Perhaps this is because many men were brought up to believe that emotional problems are a sign of weakness and so feel uncomfortable talking about their feelings.
Unfortunately older men have one of the highest suicide rates in the UK, so it is very important that you look after your mental health. Although depression is quite common, it is not an inevitable part of getting older. You don’t have to just put up with it. Treatment is available, so if you think you might be suffering from depression, visit your doctor, talk to someone you trust or contact your local branch of Mind. See ‘Useful contacts’ on page 11 for their details.

You can contact the Samaritans at any hour of the day or night if you are experiencing emotional distress or suicidal thoughts and want to talk to someone. Call them on 08457 90 90 90.

For more information on the symptoms of depression and how to deal with them, see our free information sheet no. 11 Beating the Blues. For organisations who can provide more advice and support on depression see the ‘Useful contacts’ section on page 11.

Staying fit and healthy

As we get older it is even more important that we look after both our physical and mental health. We are living longer and deserve to enjoy our retirement. Unfortunately, men tend to be less healthy than women, experiencing higher rates of heart disease, stroke, cancer, fatal accidents and suicide. They also die younger.

So, we all know that we should take better care of ourselves. It is never too late to start improving your health. In fact you can reap the benefits of a healthier lifestyle relatively quickly. You probably know what you should be doing, but it is worth recapping!

Stop smoking
Giving up smoking is the single most effective thing you can do to improve your health. Giving up can promote health benefits within days. Studies have shown that you are more likely to be successful in quitting if you get professional help and these days there is a lot available. In fact treatment on the NHS is free. Visit your doctor or contact one of the organisations listed in the ‘Useful contacts’ section on page 11.

Eat healthily
To stay fit and well we need a healthy diet to help protect us from diseases such as heart disease and some cancers. Eating well means enjoying your food
and having plenty of variety. As a rule we should all try and eat more fibre, fruit and vegetables and less fat, sugar and salt. For more information on eating well see our free advice leaflet Healthy Eating.

Make that pint last longer
A drink now and then is a good way to relax and socialise. But as with most things you shouldn’t go overboard. Regularly drinking above the recommended limits can contribute to heart disease, strokes, impotence, cancer, liver and digestive problems and accidents. The government recommends that men drink no more than three to four units of alcohol a day. A unit is roughly about half a pint of ordinary strength beer, lager or cider, a pub measure of spirits or a small glass of wine. For more information about sensible drinking or advice on alcohol misuse contact the organisations in the ‘Useful contacts’ section on page 11 or visit your doctor.

Take exercise
Whatever your age, regular, safe and enjoyable exercise is vital in maintaining a healthy way of life. It will protect your heart and bones, help you to maintain a sensible weight and aid relaxation. If you’re not as fit as you used to be it is a good idea to start gently and gradually build up the amount of exercise you do. If you have a medical condition talk to your doctor before getting started. For example, if you’ve got problems with your knees, you can do non weight-bearing exercise, such as swimming. For more information on staying fit and healthy see our free advice leaflet Keeping Mobile. Help the Aged also produces a free information sheet no. 25 Leisure Ideas which offers suggestions and contact details for different types of exercise, either on your own or at a class or club.

Avoid accidents
Statistics show that men are far more likely to be injured or killed in accidents and more likely to take risks than women. Changes as we get older, such as worsening sight, slower reaction times and being less nimble can make everyday activities more hazardous. We don’t always notice these changes in ourselves and sometimes don’t like to admit that we could have an accident. However, once you have had an accident, it will be harder to recover from it than when you were younger. To avoid accidents it is a good idea to know where risks lie and plan ways of steering clear of them. For example, getting up too quickly from bed or a chair can cause giddiness or fainting, so remember to take your time and keep obstacles out of your path. For more information see our free advice leaflets Fire, Your Safety and Staying Steady.
Look after your mental health

Being physically fit will help you stay mentally healthy and alert. And the reverse is also true; feeling well emotionally will help you cope with any physical worries that you have. You can help to keep your spirits high by getting out and about, even if it is just for a brief stroll to the Post Office. Make time to do things you find relaxing, like listening to music, gardening, dancing, watching or taking part in sport or playing cards. If you have mobility problems which make it difficult for you to leave home there are still things you can do to stay active and occupied. If you are feeling low or sad talk to a friend or relative. If you think you might be depressed don’t struggle on your own; see your doctor. For more information see our free information sheet no. 11 Beating the Blues. For suggestions for leisure and relaxation activities see information sheet no. 25 Leisure Ideas.
Useful contacts

Cancer

**Cancerbackup**
3 Bath Place
Rivington Street
London EC2A 3JR
Helpline: 0808 800 1234
Web: www.cancerbackup.org.uk

**Cancer Research UK**
PO Box 123
61 Lincoln’s Inn Fields
London WC2A 3PX
Tel: 020 7242 0200
Web: www.cancerresearchuk.org

Depression

**Depression Alliance**
Suite 212, Spitfire Studios
63-71 Collier Street
London N1 9BE
Tel: 0845 123 2320
Web: www.depressionalliance.org

**Mind**
Granta House
15-19 Broadway
London E15 4BQ
Helpline: 0845 766 0163
Web: www.mind.org.uk

Drinking

**Alcoholics Anonymous**
PO Box 1, Stonebow House
Stonebow
York YO1 7NJ
Helpline: 0845 769 7555
www.alcoholics-anonymous.org.uk

**Drinkline**
The National Alcohol Helpline
Helpline: 0800 917 8282

Impotence

**Sexual Dysfunction Association**
Windmill Place Business Centre
2-4 Windmill Lane, Southall
Middlesex UB2 4NJ
Tel: 0870 774 3571
Web: www.sda.uk.net
## Incontinence

**The Continence Foundation**  
307 Hatton Square  
16 Baldwins Gardens  
London EC1N 7RJ  
Helpline: 0845 345 0165  
www.continence-foundation.org.uk

**Incontact**  
United House  
North Road  
London N7 9DP  
Tel: 0870 770 3246  
Web: www.incontact.org

## Prostate

**The Prostate Cancer Charity**  
3 Angel Walk  
London W6 9HX  
Confidential Helpline: 0845 300 8383  
Web: www.prostate-cancer.org.uk

**Prostate Research Campaign UK**  
10 Northfields Prospect  
Putney Bridge Road  
London SW18 1PE  
Tel: 020 8877 5840  
Web: www.prostate-research.org.uk

## Smoking

**NHS Smoking Helpline**  
Tel: 0800 169 0169  
Web: www.givingupsmoking.co.uk

**QUIT**  
Tel: 0800 00 22 00  
Web: www.quit.org.uk

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If you need information on an illness or condition which we have not covered in this information sheet, please feel free to contact us. Although we are not medical experts we may be able to find information on the topic or point you to a more specialist organisation who can advise. See page 13 for our address.
For further information contact:

Information Resources Team
Help the Aged
207–221 Pentonville Road
London N1 9UZ
Tel: 020 7278 1114

If you have access to the Internet you can download our information sheets and advice leaflets by logging on to www.helptheaged.org.uk

SeniorLine is the free welfare rights advice and information service run by Help the Aged for older people and their carers. Trained advice workers offer free, confidential and impartial advice about:

- Welfare and disability benefits
- Community and residential care
- Housing options and adaptations
- Access to health and community services
- Equipment to assist independence
- Support for carers
- Agencies offering local practical help

Freephone: 0808 800 6565

Textphone (Minicom): 0800 26 96 26

9am to 4pm, Monday to Friday

If you are in Northern Ireland, contact SeniorLine on 0808 808 7575.

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Help the Aged is a registered charity No. 272786 registered in England at the above address.