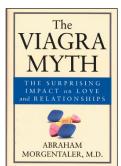
BOOK REVIEW

How much can one pill do?



The Viagra Myth by Abraham Morgentaler

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Reviewed by William D Steers

Every clinician who pulls out a pen to scribble a prescription for sildenafil (Viagra), or any other phosphodiesterase type V inhibitor, realizes this drug doesn't heal broken relationships and shattered egos, or create a sexual Olympian. The public may not be quite so enlightened. *The Viagra Myth*, by Abraham Morgentaler, exposes these beliefs for what they are—mythology, which is defined by Webster's Unabridged Dictionary as a "traditional or legendary story, usually concerning a superhuman being, person or event, with or without a determinable basis of fact or natural explanation."

This book exposes our human frailties and fears. Morgentaler, a Harvard-affiliated urologist whose capabilities extend beyond the confines of urologic surgery to encompass those of a sex therapist, is well suited to exposing this myth. The author's hope is that men and women will use these very personal and revealing case histories as starting points to improve their dialogue and relationships. There is an increasing need for such self-help books in the post-Viagra world, as disappointed men return to their physician's offices lamenting, "Viagra worked, but..." Whether the author's goal is achieved may reside more with changes in our sexual expectations and the pace of modern society than with recent scientific discoveries on the mechanisms of penile erection, seminal emission and orgasm.

The book is divided into self-explanatory chapters, including Marriages in Trouble, Relationships in Trouble, Reasons for Failure and New Therapies. Urologists will immediately recognize the frustrations, sexual folklore and standard approaches to the issues in these titles. A moderately well–educated reader can easily wade through the jargon and simplified explanations provided in this book. Most chapters begin with a patient anecdote, followed by medical explanations, and are often concluded with take-home bullet points highlighted in gray boxes. To an audience that devours reality TV shows, the case histories hear the familiar quality of exposing the most private aspects of human lives. To physicians, the book affirms the very special nature of the relationship between a compassionate doctor and his patient, especially when discussing sex.

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Early in the book, the author explores the recurring theme that men are often competitive and obsessed with sexual performance, and are devastated when it is lost. Women, on the other hand, seek sexual gratification but may desire intimacy even more. The myth of Viagra is that although the former issues may be resolved even in young men, the latter has less to do with pharmacology than with personality, insight and communication skills between couples.

Soon after the release of Viagra in 1998, it became obvious that the drug was effective for erectile dysfunction in a large percentage of men. Yet this blockbuster drug could not fix every unmet sexual need. With each sale, sexual expectations were heightened. As evidence, the author quotes statistics both encouraging and dismaying to the pharmaceutical industry. Millions of men fail to seek medical attention for erectile dysfunction, while others do not refill prescriptions for Viagra even when the drug is effective. This book points the finger at causes ranging from unrealistic expectations and drug failure, to inappropriate use and partner issues.

As a guide for men and women, the book succeeds on several levels. Case histories, while intriguing and informative, also assuage many men's egos by eassuring them that they are not alone. The book also provides insight into the male sexual brain that go beyond articles in traditional women's magazines. For men, the drive to engage in sexual intercourse can be overpowering, but many men (at least those seeking medical care) truly want to please their sexual partner, in contrast to the stereotypical uncaring, self-indulgent male. For those of us who need reminding the book offers tidbits of practical advice highlighted.

Morgentaler chooses not to delve into detailed discussions of female sexual behavior and physiology, androgen deficiency of the aging male, hormone replacement, preventive medicine or risk factors for erectile dysfunction. This may be fortunate because our scientific knowledge in these areas is woefully inadequate.

The *Myth of Viagra* is not a 'how-to' sex guide or an encyclopedia of sexual disorders. For example, nowhere in the book is there a warning that erectile dysfunction could be a harbinger of future cardiovascular disease. This is unfortunate: any text on erectile dysfunction should include this discussion for patients and health-care professionals, as up to 15% of men have an undiagnosed medical condition. This caveat highlights the potential pitfalls of Internet prescriptions without a doctor's care.

Health-care professionals may feel uneasy reading this book, as they may recognize their own practices of substituting a prescription for listening, giving drugs instead of advice, offering a quick fix for a complex problem. In this regard, many physicians are unwittingly promulgating *The Viagra Myth*. This book may not tell us something of which we are inherently unaware, but rather something that still needs to be broadcast in these times of multitasking.

Sexual behavior is the most complex of all human behaviors, and is often a barometer of overall health. Psychopathology, cardiovascular disease, metabolic disturbances and cancer can influence penile erection and other sexual functions. Likewise, the symptoms of sexual dysfunction may be symptomatic of greater ills in modern society, such as inadequate coping mechanisms for stress, lack of physical exercise, poor dietary habits and failed interpersonal relationships. Ingestion of a little blue pill may improve performance, but as I was once reminded by a patient, "Ain't no use putting lead in my pencil, Doc, if I ain't got no one to write to."