

Let's talk about sex...

Sexual medicine is a paradox: old but new, not life-threatening but essential to the survival of our species, cutting edge but bathed in mystery. It represents one of the oldest medical specialties and ancient civilizations had no qualms in discussing their sexual health and sexuality—an openness that has not pervaded through to modern life. Therein lies one of the main challenges facing sexual medicine today—are doctors, let alone patients, even willing to talk about sex? As I write this, the fiction best-seller lists are dominated by books aiming to push the boundaries of our sexual tastes. Seemingly, we are happy to read about the shades of grey of other peoples' sex lives, but unwilling to discuss the black and white of our own sexual health, even with our physician. Such concerns have been neatly demonstrated in a recent study (Dyer, K. & Das Nair, R. *J. Sex. Med.* doi:10.1111/j.1743-6109.2012.02856.x), which suggests that health-care professionals fail to discuss sexual issues with their patients for reasons as diverse as lack of time, poor training, fear of causing offense and personal discomfort.

But taboo is just one of the obstacles facing sexual medicine. Insufficient funding and lack of specific definitions for disorders have also hindered progress in the field. In their Perspectives article in this issue, Celtek and Giraldi discuss these challenges in full. Their thoughtful article asks us to face these barriers head on as a responsibility to our patients, and considers how we can overcome such obstacles to push advances in sexual medicine in general and, more specifically, in the treatment of female sexual disorders and refractory erectile dysfunction (ED).

Such advances in the field of ED include new medications, improvements in behavioural techniques, and, potentially, regenerative medicine. Researchers in sexual medicine stand at the cutting edge of medical science, with positive data emerging from the fields of stem-cell therapy and regenerative medicine, as discussed by Hakim and colleagues in their comprehensive Review. Although these techniques are currently in the preclinical stages, the data are promising, and we join the authors of this Review in voicing our high hopes that they will soon lead to the development of effective therapies for refractory ED.

But, to quote Celtek and Giraldi: sexual medicine is not just ED. Sexual disorders span the entire spectrum of sexual responses, all of which are covered in this issue. The neurobiology of the sexual response cycle is complex and many aspects remain unelucidated. Georgiadis *et al.* discuss the neurological mechanisms of the sexual response, reviewing a combination of animal and human data to attempt to untangle the neural mechanisms of the sexual reward cycle and suggest novel testable hypotheses for future sex research. Continuing our journey through

the spectrum of the sexual cycle, Corona *et al.* discuss the endocrine control of ejaculation. Although endocrine inputs into the sexual cycle are well accepted, the role of hormones in ejaculation remains somewhat of a mystery. In their Review, the authors consider the hormones that have a potential role in modifying ejaculatory response, and consider whether endocrine therapies that are already widely available for other indications could be used to treat men with ejaculation disorders.

It becomes clear throughout this issue that sexual function is a multifactorial process and, as such, sexual dysfunction in all its forms requires a multidisciplinary approach to treatment. In their Review on therapeutic strategies for patients with micropenis and penile dysmorphic disorder, Kayes *et al.* describe the options available for treatment and consider when surgery is the answer in such patients.

So finally, I return to sexual medicine's first paradox: old but new. In December of this year, at the European Society of Sexual Medicine Congress in Amsterdam, the first candidates will be examined for a European qualification in sexual medicine, making it the newest clinical field. These exams are the first time such a qualification has been possible, and reflect a changing view of sexual medicine as a clinical specialty and an acceptance that improved education and training is the best way in which we can begin to broach patients' sexual concerns and fulfil our responsibility to our patients.

Sexual medicine represents a dynamic and exciting field of research and clinical practice, and one which truly encompasses all aspects of multidisciplinary care. As the field gains recognition, we at *Nature Reviews Urology* look forward to a more open and relaxed attitude to sexual health.

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Competing interests
The author declares no competing interests.