I am a physician who practices the new medical specialty of sexual medicine, the medical aspects of sexual concerns and the sexual aspects of medical concerns.

As sexual beings, potentially all of us are sexual medicine patients, whether we are sexually active or not. The problems we physicians see are quite varied. Some of them are sexual dysfunctions, which include erection problems (getting or maintaining), orgasms (too quick, not quick enough or not satisfying), desire (too much, too little or for the "wrong" thing) or pain with sex.

Sometimes the patient's concern is not a lack of functioning, but how to enhance functioning. Physicians who specialize in sexual medicine help people improve their body image, broaden their sexual interests and feel more comfortable with their sexuality.

We treat sexually transmitted infections and other diseases that affect sexual functioning. We review the effects that medications can have on sexual functioning and whether other medications can enhance it. We provide primary care for sexual- and gender-minority patients,
as well as individuals living alternative sexual lifestyles. We manage the hormonal treatment of transsexuals, hormone replacement therapy and contraceptives.

**Physical vs. psychological**

When I started in this field, sexual medicine physicians and sex therapists believed that 90 percent of sexual concerns had a psychological cause and that only 10 percent were physiologically based. Then we decided it was the exact opposite. Now we believe that almost all concerns are a mix of both factors: psychological issues will eventually have physical ramifications, and physical problems will have psychological ramifications.

Treatment of these concerns may require a team approach; the expertise of sexual medicine physicians, surgeons, sex therapists, pelvic physical therapists and other professionals may be needed.

Sexual health is defined by the World Health Organization as "a state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sex experiences, free of coercion, discrimination and violence."

Unfortunately, the lack of sexual health is much more common than attaining a state of sexual health. Even in the sexually liberal Bay Area, too many physicians and psychotherapists are uncomfortable discussing sex or lack the training to intervene appropriately.

**What is normal?**

Most individuals at some time in their lives will have a sexual concern or problem. Physicians sometimes uncover sexual problems that are not of concern to the patient, who might say, "I do not care about sex." And patients sometimes seek out a physician with a concern that is not a problem. These patients might ask: "Is it normal to ...?"

Sometimes education or brief counseling is all that is needed. Other sexual concerns can be harbingers of more serious medical conditions.

If you have a sexual concern, bring it up with your physician. If your physician does not seem interested in exploring the issue, ask for a referral. If you are seeing a sex therapist, discuss whether a referral to a sexual medicine physician would be helpful to rule out a medical cause or contributing factor.

There are many myths about sexual health. Many people believe that sexual problems or concerns cannot be helped, or that they are the inevitable result of aging. Others may think their problems result from emotional difficulties, or that they are all related to relationship issues, or that "just taking a pill" is a cure.

Actually, there is no reason why all of us cannot have great sex throughout our lives.
Dr. Charles Moser specializes in sexual medicine and HIV medicine for the Sutter Pacific Medical Foundation. He is affiliated with California Pacific Medical Center.