Top Ten Things To Know
Sexual Activity and Cardiovascular Disease

1. Cardiovascular patients often experience decreased sexual function and activity. This is an important quality-of-life issue for these men and women and their partners. Experts from multiple disciplines have summarized the data on cardiovascular disease (CVD) and sexual activity in this paper and provided recommendations.

2. According to the authors, “Sexual activity is the cause of less than 1% of all acute MI [myocardial infarction].”

3. For women who have CVD, issues such as pregnancy, contraceptive options and safety are addressed.

4. For both men and women with CVD, the safety of sexual activity is based on the medical evaluation for their risk for CV complications. A medical history and exam for CVD patients before initiating or resuming sexual activity is important.

5. Sexual activity by patients with specific CV conditions is addressed (angina, post MI, PCI, CABG, non-coronary open heart surgery, heart failure, valvular, and congenital heart disease, arrhythmias, pacemakers, ICDs, hypertrophic cardiomyopathy, etc.).

6. Sexual activity was considered to be reasonable for patients with coronary artery disease who have no or mild angina and for patients with compensated and/or mild heart failure. [Class IIA (LOE=B)]

7. Cardiac rehabilitation and regular exercise to reduce the risk for CV complications with sexual activity can be useful. [Class IIA (LOE=B)]

8. Recommendations for drugs and pharmacotherapy in patients with CVD include these areas:
   - Drugs for CV disease symptoms or survival
   - Herbal medications for sexual dysfunction
   - Topical estrogen for dyspareunia
   - Treatment of Ed [erectile dysfunction] - PDR-5 inhibitors

9. Evaluation of CVD patients for risks of cardiovascular complications, issues and concerns, and for anxiety and depression, as well as counseling for the patient and partner is helpful to aid in a return to sexual activity following cardiac events.

10. More research is needed on CV conditions and sexual activity, and in particular, the effects in the elderly and women. Data on sexual activity and function should be included in trials, registries, surgery, and for medications when possible.