

# Fighting Erectile Dysfunction Naturally

*\*Myths*

*\*Causes*

*\*Treatments*

*\*Alternatives*

**Tim**

**Bickerstaff**



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## Introduction

### What is the problem?

You can't perform sexually like you used to. You try to get to bed first or last so you won't have to answer your wife's or girl friend's questions. You don't want to admit you are having problems staying hard long enough. You've picked up the phone to ring a "men's doctor" several times, but you've hung up before anyone answered. You hate feeling like this. You're just not that interested in sex any more and when you try you can't satisfy your partner. It's getting to the point where your partner thinks you've lost interest or you're two-timing her.

Your experience is maybe very similar to what Gary R\* went through. Before he found the answers for his problem that we will be sharing with you later in this *Fighting Erectile Dysfunction E-Book* this is what he said:

**"I had no confidence. I used to worry if I was going to get an erection. It was very embarrassing for both parties and I used to look for an excuse to avoid making love to my wife. What sort of a relationship is that?"**

**Gary R. (Santa Monica, CA)**



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Using solutions we are going to tell you about in this *Fighting Erectile Dysfunction E-Book*, Gary found something that worked so well for him that after one course of treatment he found he could function quite normally without any pills or devices.

Says Gary:

**“Everything stayed normal for over a year before I noticed that I needed a bit of a top up. I’m thrilled.”**

## **First Person Experience**

The information we will share in this *Fighting Erectile Dysfunction E-Book* is based on more than ten years of experience talking with thousands of men wanting answers for ED. They’ve shared many details of their personal lives with us, as they worked out what suits them best.

Here’s what Bruce T, one of the men we’ve talked with, says about the advice he received:

**“I’m absolutely delighted. A mate told me about your services and so I gave it a go. My God I can't believe it. I'm so happy. Even my work ethic has improved out of sight. My sister's husband is now also following the same advice and I'm telling everyone about it - even my doctor who is impressed.” Bruce T. (San Francisco, CA)**



## Fight Erectile Dysfunction Naturally



*The Fighting Erectile Dysfunction E-Book* is based on former sports talkback host Tim Bickerstaff's personal experience with erectile dysfunction. Tim (<http://www.herbalignite.com/New+Zealand/About+Us/Meet+Our+Team/Tim+Bickerstaff.html>) has written this E-Book with additional reporting and editing assistance from his business partner Jenny Wheeler.

Tim "first started noticing I had problems getting an erection in my early 50s, (I'm now 66). Since I first realised I had a problem, I've tried everything - injections, drugs, etc to find something that would work for me.

"Even for a guy who was used to fronting up, it was a very hard to talk about ED. I hung up six times before finally making the call to a specialist men's clinic for help. It's a damn hard call to make. I know what it's like.

"That was more than a decade ago, just as Viagra was about to be launched. The great news is erectile dysfunction is no longer a taboo topic like it was in the days before the little blue pill. And I've been talking about and investigating erectile dysfunction ever since. I've helped many of my mates find solutions for their erectile dysfunction problems. Everything I know about the subject - and more - we've included in our *Fighting ED E-Book*.



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"I was once an active sportsman and golfer, but I've enjoyed a bit too much of the 'good life' and now like many men of my age I've got health issues like arthritic knees, diabetes and weight – all of them conditions which contribute to erectile dysfunction. Amongst plenty of other good stuff, our 52-page *Fighting Erectile Dysfunction E-Book* gives you the "Better Sex" checklist for healthy living."

## Why hasn't your ED problem been solved?

You've thought about making a call to fix the problem but you've never got around to it. You don't know if there's any answer for you and you're worried the possible options are expensive, involve going to the doctor and you'll be embarrassed. How do you know some young woman won't answer the phone? Will the treatment leave you feeling humiliated? If you try and talk about it will your partner care? Will she feel disappointed you're not the man you were? You think your mates are all fine – they don't have a problem. If you talk about it to them, will you become a big joke? It's easier to put up with it and keep quiet than take steps to find a solution.

## What Is Possible - How We Can Help

You might be surprised to hear you are not alone. Many men face the same problem, which is often a normal side effect of aging. The great news is for the "Viagra" generation there are lots of choices for improvement and plenty of places to go for the right advice and reliable information. You don't have to put up with a lousy sex life any longer. Here's what some of the men who found the answers to erectile dysfunction we'll be sharing with you in this book say:



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**\* I can now do all night what it used to take me all night to do. To be quite honest I can't believe it. Tony R. (Miami, FL.)**



**\* I lost my wife and lost the desire for sex. However, I subsequently found a new partner, but found I could not satisfy her. In desperation I came to you for assistance. It's been really fantastic and I have never felt better. Quite frankly I am thrilled for both of us. Ken B. (Anaheim, CA)**

## **How life would be different if it were solved**

With the answers you will find outlined in this *Fighting Erectile Dysfunction E-Book* you can look forward to a long and healthy sex life. You can confidently take a woman out without worrying about not being able to perform. You can make love the way your partner wants. You can begin new relationships, and never be worried or embarrassed again about not being able to perform as you want. Age is not an issue. Just see what Ken W and John T say about the changes they made after taking the steps we outline in the *Fighting ED E-Book*:



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\* **“I am 83 years old and for the last three years I have been hopeless when it came to love-making. Believe it or not I can now perform three times a week. And I’m also much more relaxed”. Ken W. (Woodland Hills, CA)**

\* **“I am 67 and my partner is 36. We have just recently had a baby boy and I can blame it on following your advice.” John T. (Brisbane Australia)**

## **What You’ll Learn in this E-Book**

Our *Fighting Erectile Dysfunction E-Book* will highlight the top choices for men facing problems with erectile dysfunction.

You’ll discover how to

- Improve your sexual self confidence and love-making prowess
- Never be embarrassed by non-performance again
- Extend your sexual experience
- Deal with low sexual stamina, premature ejaculation and soft erections

We’ll tell you what suits you best if you are:

- On medication
- A diabetic
- Beginning a new relationship
- Reach climax too quickly
- Can’t satisfy your partner



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Listen to what Mark S. and Robert S. say about their experience following the steps we outline in our *Fighting Erectile Dysfunction E-Book*:

**\* “I feel marvellous! The advice you gave me is not a one-hit wonder that only lasts for a couple of hours. You don't have to make an appointment with your partner. And I'll tell you it is also great for my general well-being. Mark S. (Palm Springs, CA)**



**\* “I am an insulin-dependent diabetic who also has a premature ejaculation problem. It was with great scepticism that I finally decided to seek help. I had tried various pharmaceutical drugs but none of them worked. I got headaches and all that stuff. Now following your suggestions things are very, very good. And the other thing that has thrilled me is no more premature ejaculation problems.” Robert S (Townsville, Australia)**



### *So Let's Get Started, What Is Erectile Dysfunction?*

Are you able to get an erection whenever you want it? Do you find your erections last just as long as when you were younger? Don't worry if you've answered 'Not really' to these questions - you are not alone. Most men by age 40 experience some inconsistency in getting or maintaining an erection. Erectile dysfunction - ED - is the repeated inability to achieve or maintain an erection sufficient for satisfactory sexual performance.

Erectile Dysfunction is not the same as premature ejaculation, a low sex drive or a low sperm count that results in male infertility, though one or more of these conditions may accompany ED.

Occasional failure to achieve an erection (less than 20% of the time) can occur for a variety of reasons - such as drinking too much alcohol or extreme fatigue - and is not considered unusual. But a failure rate of more than 50% during the occasions when a man wants to have an erection usually indicates a problem that requires treatment. Erectile Dysfunction is much more common in older men - researchers estimate that half of men over age 60 have ED.

And although more than half of men aged between 50 and 70 years of age experience some erectile dysfunction, it is not an inevitable consequence of normal aging. But there are lots of factors - including weight, fitness levels, having diabetes or heart disease and declining testosterone - that contribute to making ED much more likely as you grow older.



## Common Causes of Erectile Dysfunction Weight

If you have acquired a “beer pot belly”, you are already a Number 1 candidate for erectile dysfunction. A growing girth is a good indicator of being at high risk for erectile dysfunction as well as diabetes, new research <sup>(1)</sup> shows.

Men with a 42 inch (107 cm) waist are more than twice as likely to have erectile problems and low libido as those a 10 inch (25 cm) smaller waist, according to a recent study of 2000 men aged 51 to 88.

*(1) "Comparison of abdominal adiposity and overall obesity in predicting risk of type 2 diabetes among men" by Youfa Wang, Eric B. Rimm, Meir J. Stampfer, Walter C. Willett and Frank B. Hu. March 2005 American Journal of Clinical Nutrition.*

Obese men are 90% more likely to develop ED than normal-weight men <sup>(2)</sup> according to a study that followed 22,000 men for 14 years which also found:

- Heart disease and ED share many of the same risk factors
- Anything that impairs blood vessel function and blood flow can affect erectile function
- Some of the obesity-related medical conditions that raise the risk of heart disease – like high blood pressure and diabetes - can also lead to ED.

*(2) Harvard School of Public Health (2006). Smoking and Obesity May Increase the Risk of Erectile Dysfunction, Constance Bacon and Eric Rimm, July 2006 issue of The Journal of Urology. (J Urol. 006; 176:217-21)*



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**The good news is that taking weight off can improve your sexual performance dramatically.**

According to Larrian Gillespie MD author of *The Gladiator Diet* “for men, **losing as little as ten pounds can have a dramatic effect on sex drive.**” As the balance of body fat reduces, the more free-circulating testosterone there is available to fuel sex drive.

## Lack of fitness

The same things that are good for a man's heart are good for your sex life.

You've heard it all before: good heart health means maintaining a healthy weight, not smoking and getting regular exercise. And these same things may all reduce the risk of developing erectile dysfunction (ED), according to the Harvard Public Health Study quoted above <sup>(2)</sup>.

The study found that:

- \* Regular exercise appeared to protect men against erectile problems.
- \* Participants who reported the highest exercise levels were 30% less likely than their inactive peers to develop ED.
- \* It's never too late: eating right and exercising can help cut risk of ED and heart problems by up to 87%.



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The relationship between erectile dysfunction and heart health can be measured in your arteries:

The heart's coronary arteries are 1.5 - 2.0mm in diameter; the penile arteries are 0.6 - 0.7mm in diameter – one third the size of the coronaries - and so become clogged sooner. ED is the warning - unless there is a change in lifestyle, coronary artery disease may follow erectile dysfunction within a few years.

To spell it out: controllable risk factors like:

- Being overweight
- Lack of exercise
- High cholesterol
- Cigarette smoking
- High blood pressure

will often produce erectile failure before progressing to affect the heart.

## **Emotional as well as physical health affects erectile dysfunction**

10 – 20% of erectile dysfunction is caused by psychological factors, notably:

- Stress
- Anxiety
- Depression
- Guilt
- Fear of sexual failure
- 



## ED Side Effects from Pharmaceutical Medicines

A wide range of drugs — including:

- Antidepressants, tranquilizers and sleeping pills
- Anti-inflammatories and NSAID's (non specific anti-inflammatories)
- Antihistamines
- Appetite suppressants
- The stomach ulcer drug cimetidine
- Medications to treat high blood pressure
- Medications to treat prostate cancer

can cause erectile dysfunction by interfering with nerve impulses or blood flow to the penis. What causes erectile dysfunction or impotence in one man may not affect another.

Men with arthritis who use the common pain killers NSAIDs to control joint and muscle pain experience significantly more erectile dysfunction than men who don't. <sup>(3)</sup>

*(3) Dr R Shiri and colleagues, University of Tampere in Finland, findings of a study with more than 1,100 Finnish men between 50 and 70 years of age published in the May 2006 issue of the Journal of Urology.*

Men with arthritis showed a 30% increase in erectile dysfunction. Erectile dysfunction more than doubled among men who took NSAIDs like ibuprofen and naproxen.



## Diabetes

Many men with diabetes experience erectile dysfunction because the disease can damage nerves and arteries, making it difficult to achieve an erection.

This stressful disorder is often linked to Insulin Resistance, an imbalance in blood glucose and insulin levels associated with excess weight and obesity. Being overweight can place extra strain on the cardiovascular system and disrupt the delicate balance required to achieve an erection and cause ED.

However, major weight loss can be achieved can by reversing Insulin Resistance, thus removing major factors in the onset of ED.

Research shows:

- A waist size of 34cm to 36cm doubles diabetes risk.
- A waist size of 36cm to 38cm inches nearly triples the risk.
- A waist size of 38cm to 40cm inches is associated with five times the risk.
- A waist size of 40cm to 62cm inches is associated with 12 times the risk. <sup>(1)</sup>

(1) "Comparison of abdominal adiposity and overall obesity in predicting risk of type 2 diabetes among men" by Youfa Wang, Eric B. Rimm, Meir J. Stampfer, Walter C. Willett and Frank B. Hu. March 2005 American Journal of Clinical Nutrition.



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In diabetics, erectile dysfunction:

- **Occurs more often:** As many as 80% of men with diabetes develop erectile dysfunction, compared to about 22% to 25% of men without diabetes.
- **Occurs earlier:** Erectile dysfunction most frequently develops after age 65. In men with diabetes, however, it tends to occur 10 or 15 years earlier, on average. Men in their 30s and younger with diabetes have also experienced erectile dysfunction.



The longer you've had diabetes and the more severe it is, the more likely you are to develop erectile dysfunction. When you have diabetes, the main risk factors for developing erectile dysfunction are:

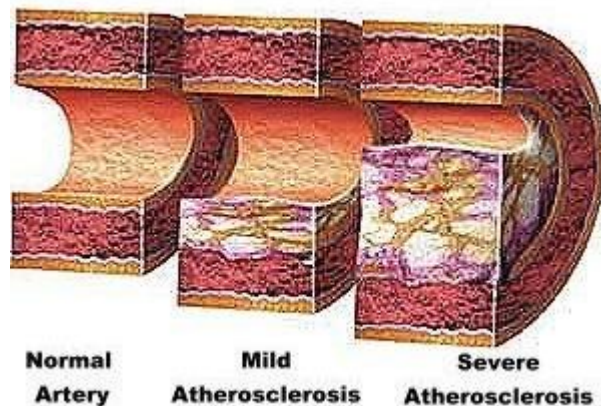
- Nerve damage (neuropathy)
- Blood vessel (vascular) damage
- Poor blood sugar control



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Diabetes can cause neuropathy or damage to nerves throughout your body, including the penis. Damaged nerves can't communicate properly. So even though you might be emotionally stimulated to have intercourse, nerve damage means that information isn't relayed to the penis, and it doesn't respond.

In addition, poor blood sugar control can inhibit nitric oxide production. Lack of nitric oxide can prevent the pressure of blood in the corpora cavernosa from rising enough to close off penile veins, allowing blood to flow out of the penis instead of remaining trapped for an erection.



Blood vessels can also become narrowed or hardened (atherosclerosis) by conditions that often accompany diabetes, such as cardiovascular disease. When atherosclerosis occurs in arteries that supply the penis or pelvic area, sexual function may be disrupted.



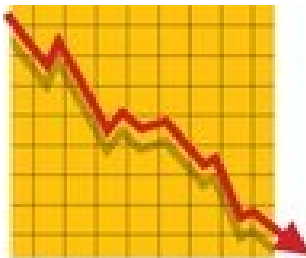
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## Getting older, declining testosterone

Erectile dysfunction often occurs in older men mainly because they're more likely to have underlying health conditions or take medications that interfere with erectile function.

As many as 80% of men 75 and older have erectile dysfunction. Many men begin to notice changes in sexual function as they get older. Erections may take longer to develop, may not be as rigid or may take more direct touch to the penis to occur. But erectile dysfunction isn't an inevitable consequence of normal aging.

Men's sexual peak usually occurs at around the age of 18, when testosterone, the key male sex hormone, is at its highest levels.



For some men, significant declines in sexual performance can occur as early as in their late 20s. Testosterone falls by 1% a year after the age of 40. After 50, 50% of men complain about episodes of erectile dysfunction when they could not perform as they wished.



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Alpha males like prolific Oscar winning Anthony Quinn (Zorba the Greek) father children in their eighth and ninth decades, but for many men aging means longer times to achieve full erection, less firm erections, lower libido or lower sex drive, a decline in sexual stamina, and decreased sexual pleasure.

Just as women produce less estrogen as they age, older men produce less testosterone, the hormone responsible for sex drive. By age 80, most male hormone levels have decreased to pre-puberty levels. And just as many women travel comfortably through mid life with a minimum of menopausal symptoms, not all men notice any hormonal change.

Approximately 40% of men between 40 and 60 will experience some degree of menopausal symptoms (lethargy, depression, mood swings, irritability, hot flushes, insomnia, low libido, and impotence)



## Alcohol, smoking, marijuana, party pills and drugs

### Smoking

The Harvard study of 22,000 men over 14 years<sup>(2)</sup> found smoking increases the risk of erectile dysfunction by 50%.

*(2) Harvard School of Public Health (2006) Smoking and Obesity May Increase the Risk of Erectile Dysfunction, Constance Bacon and Eric Rimm, July 2006 issue of The Journal of Urology. (J Urol. 006; 176:217-21)*

- Smoking can lower testosterone and increases the risk of heart disease, stroke, aneurysms, and hypertension because of elevated cholesterol levels. Elevated cholesterol clogs the sensitive small blood vessels responsible for trapping blood in the penis during an erection.
- Smoking and other tobacco use cause blood vessels to narrow, contributing to blockages that can lead to erectile dysfunction. Smoking also can decrease nitric oxide levels.
- The more cigarettes smoked, the greater the risk<sup>(4)</sup>.

*(4) Tulane University (2007, August 1). Erectile Dysfunction Linked To Smoking. ScienceDaily.*

- Men with high blood pressure who smoke are 26 times more likely to have erectile dysfunction --impotence -- than non-smokers<sup>(5)</sup>.

*(5) John Spangler, M.D., M.P.H., Wake Forest University Baptist Medical Center (2001, May 22). Smokers More Likely To Experience Impotence, ScienceDaily.*



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**Chronic use of alcohol, marijuana or other drugs often causes erectile dysfunction and decreased sexual drive.**



- Drinking excessive amounts of alcohol can cause erectile dysfunction by damaging blood vessels. In general, for men that means no more than two alcoholic drinks a day, and for women, no more than one.
- Party pills and party drugs like marijuana and crystal methamphetamine can stimulate desire, but make it difficult to attain an erection.

Alcohol temporarily elevates serotonin levels but they soon plummet. (Author Jed Diamond describes serotonin as “the male hormone of bliss.”)



*What can you do?*

**Healthy life style – exercise, good diet and the rest**

## **The “Better Sex” Check List**

- Talk to your doctor about stress, anxiety or depression
- Exercise regularly
- Eat regular meals low in fat and salt and high in fruit and vegetables
- Reduce alcohol intake
- Get adequate sleep
- Take steps to deal with personal conflict
- Stop smoking



## Exercise and Healthy Eating

The benefits of exercise and healthy eating constantly reinforce each other.

Exercise helps lower cholesterol and blood pressure. A diet low in fat and cholesterol also helps to prevent and reverse the buildup of fatty deposits in blood vessels.

A high blood sugar level damages nerves as well as the blood vessels that are involved in getting an erection. A good diet and the right amount of exercise help keep your blood sugar level under control. Studies show that people who exercise are less likely to get diabetes, and people with diabetes who exercise have better control of their blood sugar levels.

## Healthy Eating

Good nutrition may help improve erectile dysfunction.

- **Eat** whole, fresh, unrefined, and unprocessed foods. Include fruits (lots of richly pigmented berries to support vascular integrity), vegetables, whole grains, soy, beans, seeds, nuts, olive oil, and cold-water fish (salmon, tuna, sardines, halibut, and mackerel).
- **Avoid** sugar, dairy products, refined foods, fried foods, junk foods, and caffeine.
- **Drink** 50% of your body weight in ounces of water daily (e.g., if you weigh 68kgs, drink 75 oz of water - 9 X 8 ounce glasses - daily).
- **Control blood sugar** (particularly relevant for diabetics)



## Supplements



Supplements are intended to provide nutritional support. Because a supplement or a recommended dose may not be appropriate for all persons, a physician (i.e., a licensed naturopathic physician or holistic general practitioner or MD) should be consulted before using any product.

Recommended doses follow:

- **Bioflavonoids** – Take 1000 mg daily.
- **Flaxseed meal** – Grind 2-4 tablespoons daily. Flaxseed meal is a better choice due to its fiber, lignan, and vitamin content, but flaxseed oil (1 tbsp daily) can be substituted.
- **Inositol hexaniacinate** – Take 1000-3000 mg daily to improve circulation and lower cholesterol. Diabetics should not take this supplement.
- **Selenium** – Take 200 mcg daily.
- **Vitamin C** – Take 1000 mg 3 times daily with meals.
- **Vitamin E** – Take 400 IUs daily.
- **Zinc** – Take 30 mg daily.



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As the balance of body fat reduces, the more free-circulating testosterone there is available to fuel sex drive.

- ☑ Forget low carb fad diets. Only a diet that includes protein and carbs produces enough serotonin - "the male hormone of bliss" according to Jed Diamond, author of *The Irritable Male Syndrome – Managing the 4 Key Causes of Male Depression and Aggression*.
- ☑ Alcohol gives serotonin a temporary bump but then dramatically lowers it, so it pays to go easy on booze. In general that means a daily intake of no more than two alcoholic drinks for men and one for women.
- ☑ To maximize testosterone, Diamond says, stay away from coffee, liquorice and diet sweeteners.

## Work Out Your Workout

When it comes to exercise, you don't have to follow any "fad" workouts. Just find a way to get your body moving and your heart rate up.

- ☑ 30 minutes of moderate exercise five days a week; or
- ☑ 20 minutes of vigorous exercise three days a week.

But what do "moderate" and "vigorous" actually *mean*? You can tell how intense the activity you're doing is by measuring your heart rate while you're doing it.

First, figure out what your maximum heart rate is. That's the number 220 minus your age. If you're 40, your max heart rate is 180.

