

# **TAPPED: Teaching Advanced Practice Providers About Erectile Dysfunction**

Formal Abstract of DNP Capstone Project

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**PROBLEM/BACKGROUND:** Erectile dysfunction (ED) is the consistent or recurrent inability to achieve, maintain, or sustain a penile erection sufficient for satisfactory sexual intercourse (Maiorino, Bellastella, & Esposito, 2014, p. 96). ED is a concern for millions of men worldwide and is the most common form of sexual dysfunction affecting men and their partners (Seid, Gerensea, Tarko, Zenebe, & Mezemir, 2017). Men with diabetes are three times more likely to develop ED than those who do not have diabetes (Maiorino et al., 2014). Several medications used to manage chronic conditions such as diabetes adversely impact erectile function (Sondhi, Kakar, Gogia, & Gupta, 2018). Advanced practice providers (APPs) working outside of urology practices are often approached about ED concerns in diabetes management. **PROJECT PURPOSE** This project aims to implement an effective screening and treatment tool to offer APPs a more integrated approach to treat ED in men with diabetes to improve patient health outcomes.

**THEORETICAL FRAMEWORK:** The Health Belief Model (HBM) is the chosen theory to provide a framework for this project. The HBM is one of the first theories of health behavior that attempts to explain why people fail to adopt disease prevention strategies. This model is ideal for addressing problem behaviors that evoke health concerns, such as how chronic uncontrolled diabetes can lead to ED. The HBM suggests that people's beliefs and behaviors about health problems are contingent on the following key elements: perceived sensitivity, perceived severity, perceived threats, perceived benefits, perceived barriers, and self-efficacy. The DNP project will utilize the HBM framework to guide the APPs on the benefits of behavior change to facilitate care for men with diabetes with ED.

**METHODOLOGY:** The target population consists of 10 APPs who practice outside of a urology practice. The project was implemented in a virtual format. The APPs received an introductory email introducing the project with a proposed project timeline. In Phase 1 of the project, the APPs completed a pre-intervention 10-item questionnaire to assess their knowledge of ED. In phase 2, the APPs viewed a 30-minute video presentation on ED. Phase 3 followed with a 10-item post-intervention questionnaire and a feedback survey. The APPs received a screening and

treatment tool on ED via email. This document highlights key facts about ED, including signs and symptoms, risk factors, preventative measures, and medications to treat ED. In the final phase of the project, questionnaires and feedback survey results were reviewed to determine project effectiveness and the need for future revisions.

**IMPLEMENTATION:** The pre-and post-intervention questionnaires consist of 10 questions. The APPs were educated via a 30-minute video presentation. Following the presentation and questionnaire completion, the participants received a screening and treatment tool on ED that they can refer to in the future to navigate the care of men with diabetes with ED.

**EVALUATION:** The evaluation of this project's data was performed utilizing pre-and post-intervention questionnaires and a feedback survey. Knowledge retention was measured by comparing the pre-and post-questionnaire results. The participants shared comments about the project via a feedback survey discussed among the DNP team to determine if there was any need for project revisions.

**RESULTS:** The results reflect that the project was successful and accomplished the desired goals. The outcome was measured using pre-and post-intervention questionnaires to assess the target population's knowledge. Analysis of the responses reflected an increase in participant knowledge of ED screening and treatment in men with diabetes. Pre-intervention scores improved from 60% to 86% post-intervention on most core questions. Furthermore, many participants reported: • an increase in their confidence level treating ED in men with diabetes • satisfaction with the knowledge gained from the intervention • enthusiasm about the resources provided for future guidance in patient care.

**IMPLICATIONS FOR PRACTICE:** ED negatively impacts the quality of life of millions of men and their partners. APPs working outside of urology practices are often approached about ED concerns. This DNP project's primary purpose is to implement an effective screening and treatment tool for APPs treating ED in men with diabetes. Offering a more integrated approach to care will also improve patient outcomes.

## **REFERENCES:**

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