

MATeS

Examining the Reproductive Health of Middle-Aged
and Older Australian Men



MATeS Explained

The Men in Australia Telephone Survey (MATeS) was commissioned by Andrology Australia to collect information on self-reported prevalence rates, health behaviours, attitudes and concerns of middle-aged and older Australian men on broad aspects of men's health and well-being, including reproductive health. From a total of 7636 randomly selected households from across Australia with an eligible male (aged 40 years and over in permanent residence), 5990 (78%) men agreed to participate in a 20-minute telephone interview. Equal numbers of men in the age groups 40-49, 50-59, 60-69 and 70+ years were surveyed with findings census-standardised to the national population. All States and Territories were represented, with over sampling in Tasmania and Northern Territory to ensure proportionate representation.

The oldest participant in the survey was 98 years of age and almost 400 men were aged 80 or over.

Are Australian Men Healthy?

There are great differences between men's and women's health when compared. Men are more likely to experience chronic disease and have a lower life expectancy than women.

But how healthy is the Australian male¹?

For the first time through MATeS we have a unique 'snapshot' of the health and well-being of the middle-aged and older Australian male (40 years and older), a population group that is rapidly increasing. Such information is usually based on studies from overseas, but now we know that:

- > Over 40% of men aged over 40 years have serious health problems (for example, heart disease, diabetes) and this rose to two thirds of men over 70 years.
- > About 17% of men rated their health as 'fair' or 'poor', this being greater in men over 70+ years (27%).
- > About 13% of men reported being depressed enough to interfere with daily life, being less common in older men (7% in men aged over 70 years).

MATeS has provided a large data set, and together with depth of questioning, these survey results can provide a clearer picture of the issues commonly linked to men's health.

Do men go to their doctor?

MATeS FACT: More than 85% of men over the age of 40 years had visited a doctor in the 12 months prior to the interview, with almost all (98%) older men (70+ years) using health services.

But when they go, men don't talk about reproductive problems with their doctor:

- > Amongst men with erectile problems (impotence), only 30% had spoken to a doctor about their problem. Only about 58% of these men received treatment for erectile dysfunction.
- > Older men were less likely to speak with a doctor about erectile problems.
- > Italian and Indigenous men were less likely to speak to a doctor about an erectile problem than other cultural and ethnic groups.
- > Less than 10% of men had blood tests to check testosterone levels, although 31% thought they suffered symptoms of low testosterone.

Missed opportunities to talk to GPs about reproductive health problems may also mean that other serious medical conditions linked with reproductive health, for example diabetes and heart disease, are being over looked.

Are male reproductive health problems common?

MATeS FACT: Overall, more than a third (34%) of men aged 40 years and older surveyed reported one or more reproductive health problems, all being more common amongst older men.

- > 16% of men reported significant lower urinary tract symptoms (LUTS) such as a frequent need to urinate and difficulty passing urine.
- > 14% of men overall had been diagnosed with prostate disease.
- > 21% of men over 40 years suffered significant erectile problems.

A large proportion of the middle-aged and older Australian male population is affected by reproductive health problems, highlighting the need for men to have ready access to appropriate treatments and services.

Are men concerned about their reproductive health?

MATeS FACT: Men expressed high levels of concern about prostate cancer, losing erectile function and declining testosterone levels with age.

- > About 80% of men with normal erectile function were concerned about losing their ability to get an erection.
- > Almost 60% of men were concerned about prostate cancer. This was reflected by half of all the men having had a blood test for Prostate Specific Antigen (PSA) and/or a digital rectal examination (DRE) to check for a prostate problem.
- > 39% of men with significant urinary problems indicated some dissatisfaction about their urinary condition if it were to continue for the rest of their life.
- > About 18% of men were concerned that they may develop symptoms of low levels of testosterone.

But, as men got older, concern for reproductive health was less:

- > Older men were less concerned about their inability to get an erection than younger men.
- > Men in older age groups were less concerned about developing symptoms of low testosterone.

Having a reproductive health problem can strike at the core of a man's sense of masculinity which may impact on relationships and quality of life. Health policy needs to acknowledge and reflect men's concern about their reproductive health.

Is the Australian lifestyle a healthy lifestyle²?

MATeS FACT: Almost two thirds of Australian men over 40 years were overweight or obese.

- > Overall, about 1 in 5 men (and 1 in 3 men aged over 70 years) had a 'large' (>102cm) waist circumference.
- > Only about a third of men in each of the age groups were physically active. Almost 25% of men did not participate in any physical activity.
- > 18% of men over 40 years currently smoke, being highest in the 40-49 year age group (26%).
- > 7% of men over 40 years drank more than the recommended daily intake of alcohol, classifying them as risky or high-risk drinkers.
- > Overall, about 2% of men were underweight, being more common in older age groups (4%).

It is well-recognised that being overweight, physically inactive, being large around 'the middle', smoking and drinking to excess are key risk factors for heart disease. Studies also show that these same lifestyle risk factors are associated with reproductive health problems.

Do men know what the male sex hormone testosterone does?

MATeS FACT: Men's knowledge of the role of testosterone was low, with about 1 in 4 men never having heard of the term, with more men in the older age groups being unfamiliar with the term.

- > About half of those men who were familiar with the term were not aware of testosterone's role in maintaining bone strength and body hair distribution, with most men attributing its role to maintaining sexual function and masculine behaviour.

There is much in the media about non-scientific terms like 'andropause' and 'male menopause' suggesting that older men benefit from testosterone treatment. Education is needed for men to understand normal reproductive function which will help men seek treatment when needed.

Do erectile problems only affect older men?

MATeS FACT: Overall, more than 1 in 5 men (21%) over 40 years reported significant erectile problems.

- > Significant erectile dysfunction increased with age, from 3% in men aged 40 to 49 and highest numbers in men over 70 years (68%).
- > While numbers in some ethnic groups were low, erectile problems appeared to be more common in men born in Italy (32%) and Eastern Europe (28%) compared to those born in Middle Eastern (14%) and Asian countries (8%).
- > While the frequency of sexual activity is lower in older men, 37% of men aged over 70 years have had sexual relations in the past 12 months.

While there is a clear link between loss of erectile function and age, many men continue sexual activity in later years and may need to seek treatment to maintain their sexual relationships.

Do 'prostate problems' mean 'cancer'?

MATeS FACT: Significantly more men report having prostate disease and urinary problems than men who report being diagnosed with prostate cancer.

- > Almost 1 in 5 men (19%) over 40 years needed to urinate more than twice during the night.
- > Significant urinary problems and prostate disease were more common in older men: for men aged over 70 years, 29% had significant urinary problems and 38% were diagnosed with prostate disease.
- > Approximately 3% of all men had been diagnosed with prostate cancer, being lowest in men aged 40-49 (0.1%) and highest in the 70+ age group (9%).
- > About 50% of all men in this study had a blood test for Prostate Specific Antigen (PSA) rising to 76% in the 70+ age group.

Many people think that urinary symptoms in men are a sign of prostate cancer. Most often these urinary symptoms are caused by benign prostate enlargement and not prostate cancer. However, in a small percentage prostate cancer is present, highlighting a need for improved education and awareness.

¹ In this context, health is defined as any issue that affects the wellbeing and quality of life of the individual

² According to Australian guidelines; Australian Institute of Health and Wellbeing (AIHW). Indicators of health risk factors: the AIHW view. AIHW Cat. No. PHE 47. Canberra: AIHW; 2003 ; National Health and Medical Research Council (NHMRC). Australian alcohol guidelines: health risks and benefits. Canberra: NHMRC; 2001; Commonwealth Department of Health and Aged Care (DHAC). National physical activity guidelines for Australians. DHAC: Canberra; 1999.

Key Points:

- > MATeS represents a unique dataset and the first accurate picture of reproductive health in Australian men over the age of forty.
- > A distinctive feature of MATeS is its comprehensive focus on male reproductive health as a whole, which differs from most surveys that are restricted to single health issues such as erectile dysfunction, lower urinary tract symptoms (LUTS) or prostate disease.
- > Despite the high level use of health services reported, there was a strikingly lower level of specific enquiry and treatment for reproductive health disorders. Opportunities to talk to GPs about reproductive health problems are being missed.
- > Male reproductive health problems, such as erectile dysfunction and prostate disease, are very common and men need to be educated about these issues and their implications for their health and quality of life.
- > The high rates of reproductive health disorders and related concerns highlight the need for men to have access to appropriate treatments and services.
- > Health policy needs to reflect men's reproductive health needs at different stages of their lifetime.
- > With a recognised link between reproductive health disorders with age, more men are expected to seek help in the future. This fact has implications for medical workforce planning and education.
- > With older people being sexually active, improved education and policy is needed to ensure that age-related barriers to seeking information and treatment for reproductive health issues do not persist for older men.

MATeS highlights the need for larger, longitudinal cohort studies to gain a better understanding of incidence and progression of disease and determine risk factors and behaviours that may contribute to the onset of health disorders in older men.



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Survey findings on which this summary is based have been published in:

Holden CA, McLachlan RI, Pitts M, Cumming R, Wittert G, Agius P, Handelsman DJ and de Kretser DM.
Men in Australia Telephone Survey (MATEs): A national survey of the reproductive health and concerns of middle-aged and older Australian men. *Lancet* 2005; 366:218-24

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