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Popular Erectile Dysfunction Drug Associated with Higher Risk of Glaucoma

Analysis by Dr. Joseph Mercola | November 25, 2026

STORY AT-A-GLANCE

- Men who used tadalafil long term had a 22% higher relative risk of developing glaucoma over five years, raising concerns for those who take the drug daily for erectile dysfunction or urinary symptoms
- Tadalafil use was also linked to a 32% higher relative risk of elevated eye pressure, a 33% higher risk of primary open-angle glaucoma, and a 33% greater likelihood of starting glaucoma treatment
- Glaucoma often progresses without noticeable early symptoms, so knowing your baseline eye health and monitoring it regularly is especially important if you use tadalafil long term
- Erectile dysfunction can signal problems with blood-vessel and metabolic health before more obvious cardiovascular symptoms appear, making it important to address the underlying causes rather than relying solely on medication
- Supporting healthy circulation through diet, daily movement, pelvic floor exercises, restorative sleep and sensible sunlight gives you practical ways to address factors contributing to erectile dysfunction alongside — not instead of — any medical treatment your doctor recommends

If you take Cialis (tadalafil) every day for urinary symptoms or erectile dysfunction, a large multinational study now links that daily use to a higher risk of glaucoma — the eye disease that silently destroys peripheral vision before you realize anything has changed.

The study, published in the British Journal of Ophthalmology, tracked nearly 74,000 men over five years and found a consistent association between daily tadalafil and new glaucoma diagnoses.[1] The finding doesn't prove the drug causes the disease, but the size of the study and the persistence of the signal across multiple statistical checks make it difficult to dismiss.

Taking Tadalafil Daily Was Linked to Higher Glaucoma Risk

For the study, researchers analyzed records from the TriNetX database for men age 40 and older who entered the study between 2012 and 2022. Anyone who already had glaucoma was excluded. Glaucoma is an eye disease marked by progressive damage to the optic nerve, which carries visual information from your eye to your brain. Early disease often causes no noticeable symptoms. As damage advances, you lose peripheral vision, and untreated glaucoma eventually threatens sight.

That silent progression makes a medication-related increase in risk especially important to recognize. To make the study comparison more meaningful, the researchers used propensity score matching, essentially creating a statistical twin for each tadalafil user so the comparison isn't skewed by differences in age, health conditions or medications.

This produced two groups of 36,927 men each: tadalafil users and matched men who didn't use PDE5 inhibitor drugs, a class of medications, including Viagra and Cialis, that increase blood flow by helping blood vessels relax. PDE5 stands for phosphodiesterase type 5, the enzyme these drugs block. Matching accounted for age, race, kidney function, medications and health conditions that could otherwise distort the results.

- **Tadalafil users had higher rates of glaucoma, elevated eye pressure and treatment initiation —** Over five years, men who used tadalafil had a 22% higher relative risk of developing glaucoma than matched men who didn't use PDE5 inhibitors. The five-year cumulative incidence was 3.93% among tadalafil users compared with 3.16% among nonusers.

The absolute difference is modest, but because glaucoma progresses silently and the damage is irreversible, even a small additional push toward the disease deserves attention.

The pattern extended beyond glaucoma overall. Tadalafil users had a 32% higher relative risk of ocular hypertension, meaning elevated pressure inside the eye, and a 33% higher relative risk of primary open-angle glaucoma, the most common form of glaucoma. They were also 33% more likely to start glaucoma treatment. Researchers found no significant association with low-tension glaucoma or primary angle-closure glaucoma.

- **The glaucoma association remained after researchers accounted for numerous health differences —** The analysis considered smoking, alcohol-related disorders, cardiovascular disease, diabetes, cancer, high cholesterol, obesity, chronic obstructive pulmonary disease and other medical factors. That matters because many of these conditions could influence eye health independently of tadalafil use.

  Even after those variables were balanced, tadalafil remained associated with higher glaucoma risk. This doesn't prove the medication caused the disease, but it strengthens the finding by reducing the chance that obvious differences between the two groups fully explain the result.

- **The signal persisted across several timing tests —** Researchers repeated their analyses with one-, three- and six-month lag periods. In simple terms, they temporarily ignored glaucoma diagnoses that appeared soon after tadalafil treatment began to test whether preexisting but undiagnosed eye disease could explain the association.

  The relationship remained. This timing analysis gives the finding more weight because it makes it less likely that men simply started tadalafil around the same time an already-developing glaucoma case happened to be detected.

- **Older men and several clinical groups showed the same general pattern —** The researchers reported consistent associations among men older than 50, White participants and people with various underlying medical conditions included in the study.

  That means the finding wasn't confined to one narrow group with an unusual health profile. Still, most participants were White, so the researchers cautioned that the results don't translate as confidently to men from other racial and ethnic groups.[2]

- **Long-term PDE5 inhibition could alter how the eye functions, but the exact pathway remains unresolved —** Tadalafil blocks PDE5, an enzyme involved in cell signaling and blood vessel regulation. Because tadalafil lasts longer than some other drugs in this class and is often taken every day for urinary symptoms, the researchers focused on what chronic inhibition could mean for eye physiology.

  PDE5 is present in the smooth muscle of the eye, including the tissue that regulates how fluid drains out of the anterior chamber. When the enzyme is chronically blocked, the resulting shifts in nitric oxide signaling could change fluid outflow enough to raise intraocular pressure over time — a plausible link, though one that still needs direct confirmation in human studies.

  They wrote that "chronic PDE5 inhibition may influence ocular physiology," while also calling for more research into the mechanism.[3] In other words, the study identified a consistent association but didn't establish the biological chain of events that links tadalafil exposure with glaucoma.

- **The study's limitations matter when you interpret the risk —** Because researchers relied on existing medical records, they couldn't verify exactly how consistently each man took tadalafil, whether prescriptions changed over time or whether new medical conditions developed after study entry. The design was observational, so it could detect associations but not prove cause and effect.

The researchers therefore didn't advise people to stop tadalafil. Instead, they emphasized closer eye surveillance for long-term users who already have glaucoma risk factors, noting that the findings "do not contraindicate tadalafil use." If you use tadalafil regularly, the practical takeaway is to know your baseline eye health and discuss appropriate follow-up with your eye-care professional.

A baseline assessment typically includes measuring your intraocular pressure, imaging the optic nerve with optical coherence tomography (OCT) and testing your visual field. If your eye-care professional doesn't routinely run all three, ask for them, especially if you plan to continue daily tadalafil. Talk to your healthcare provider about whether this testing is appropriate for you.

How to Address Erectile Dysfunction

The glaucoma finding is one more reason the "take a pill" approach to erectile dysfunction carries accumulating trade-offs. If you use tadalafil for **erectile dysfunction**, I recommend addressing why your **erectile function has declined** rather than relying on a drug.

Erections depend heavily on healthy blood flow, metabolic health and nerve function, so erectile dysfunction gives you useful information about your broader health. The glaucoma association reported with long-term tadalafil use adds another reason to address those underlying factors whenever possible.

1. **Start with your cardiovascular and metabolic health —** If you have erectile dysfunction, treat it as a reason to assess your **cardiovascular and metabolic health** rather than simply suppress the symptom. An erection depends on healthy blood vessels opening enough to deliver a strong flow of blood to the penis.

   When those vessels don't function properly, erectile dysfunction can appear before more obvious signs of cardiovascular disease, making it an important early warning sign rather than just a sexual problem.

Your metabolic health affects this same vascular system. Improve it by eliminating processed foods and seed oils rich in linoleic acid (LA), which interfere with mitochondrial function and contribute to poor vascular health. Use stable fats such as grass fed butter, ghee and beef tallow instead.

If excess body weight is an issue for you, address it as part of the same strategy. By improving the health of your blood vessels and the cellular energy needed to regulate circulation, you address factors that contribute to erectile dysfunction instead of relying solely on medication to produce an erection.

2. **Use food to support healthy blood flow —** Build your carbohydrate intake around whole fruits and other foods you tolerate well, with a general target of 250 grams of carbohydrates per day for most adults and more if you're highly active. Berries, citrus fruits, apples and pomegranates provide compounds that support vascular function.

   Some early research suggests pomegranate's antioxidant compounds may help support nitric oxide activity, a molecule involved in relaxing blood vessels and supporting healthy blood flow, including blood flow relevant to erectile function.

3. **Strengthen your pelvic floor and move every day —** Your pelvic floor muscles help trap blood inside the penis during an erection. Practice pelvic floor exercises regularly, and pair them with daily movement. Your pelvic floor muscles act like a valve, holding blood inside the penis to maintain an erection.

   Strengthen them with Kegel exercises: contract the muscles you'd use to stop urinating, hold for five to 10 seconds, release, and repeat 10 times for three sets each day. Also work toward as much as 60 minutes of walking each day and add strength training twice a week. If you sit for long periods, stand and move regularly rather than allowing hours to pass without activity.

4. **Make sleep and sunlight part of your strategy —** Protect your circadian rhythm with bright morning sunlight, dim lights after sunset, fewer screens at night and a dark bedroom. Aim for a consistent sleep schedule — going to bed and waking at roughly

the same times every day, including weekends.

During the day, sensible sunlight also supports vitamin D and cellular energy production. I recommend avoiding harsh midday sun until you've eliminated seed oils for about four to six months, since accumulated LA increases your susceptibility to sunburn.

5. **Protect your eye health —** If you continue long-term tadalafil use, don't ignore the glaucoma signal identified in the British Journal of Ophthalmology study. Establish your baseline eye health and monitor it regularly, especially if you have elevated eye pressure, glaucoma, high myopia or a family history of glaucoma. The researchers specifically support baseline eye assessment and regular follow-up for people who are on long-term tadalafil therapy.[4]

FAQs About Tadalafil and Glaucoma

Q: How much higher was glaucoma risk among men taking tadalafil?

A: Men who used tadalafil had a 22% higher relative risk of developing glaucoma over five years compared with matched men who didn't use PDE5 inhibitor drugs. The five-year cumulative incidence was 3.93% among tadalafil users versus 3.16% among nonusers.

Q: What other eye problems were associated with tadalafil use?

A: Tadalafil users had a 32% higher relative risk of ocular hypertension, or elevated pressure inside the eye, and a 33% higher relative risk of primary open-angle glaucoma. They were also 33% more likely to begin glaucoma treatment.

Q: Does the study prove tadalafil causes glaucoma?

A: No. The study found an association, but because researchers analyzed existing medical records rather than conducting a randomized trial, they couldn't establish cause and effect. They also couldn't confirm how consistently participants took tadalafil or fully account for prescription and health changes over time.

Q: Why is erectile dysfunction a reason to look at cardiovascular and metabolic health?

A: An erection requires healthy blood vessels to deliver enough blood to the penis. When vascular function declines, erectile dysfunction can appear before more obvious signs of cardiovascular disease. Supporting metabolic health, healthy circulation and cellular energy therefore addresses factors contributing to ED rather than simply masking the symptom with medication.

Q: What can you do if you take tadalafil long term?

A: Establish your baseline eye health and monitor it regularly, especially if you already have elevated eye pressure or other glaucoma risk factors. At the same time, address erectile dysfunction at its roots by supporting cardiovascular and metabolic health, eating foods that promote healthy blood flow, strengthening your pelvic floor, staying active and improving your sleep and sunlight exposure.

This article is for informational purposes only and does not constitute medical advice. Consult a qualified healthcare provider before making changes to your health regimen.

Sources and References

- [1, 3, 4] British Journal of Ophthalmology August 4, 2026
- [2] SciTech Daily August 12, 2026