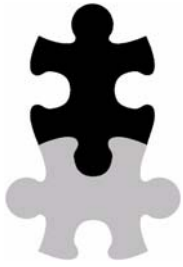


The Impotence Association

(Sexual Dysfunction Association)

Windmill Place Business Centre, 2-4 Windmill Place, Southall, Middlesex UB2 4NJ



Premature Ejaculation

This fact sheet provides some helpful information on premature (or rapid) ejaculation.

- What is premature ejaculation?** Premature ejaculation describes the condition where a man ejaculates (or comes) too soon. Sometimes this happens even before any direct stimulation of the penis occurs. Just thinking about a sexually stimulating situation can trigger ejaculation. However it is more common for ejaculation to occur either during or very soon after penetration.
- Just how soon is too soon?** There is no universally accepted definition of premature ejaculation. Studies have shown, that ejaculation often occurs within two minutes of penetration. Some men last much longer and some ejaculate much quicker. The important point to remember is that if ejaculation occurs sooner than the man and his partner wishes and this is causing distress in the sexual relationship, then, it can be regarded as 'premature' or 'rapid'. Partners' wishes must always be taken into account; what the man considers premature his partner may not.
- How common is premature ejaculation?** Premature ejaculation is one of the most common sexual problems affecting men. Most men will experience premature ejaculation at some time. It can become a problem when this situation is repeated in most sexual situations. Studies have shown that it is highly prevalent across all socio-economic groups and more than 40% of men are affected.
- At what age does premature ejaculation occur?** Premature ejaculation can occur at any age and under any situation, but it is more commonly a problem for the younger man. The occurrence of premature ejaculation is more related to the novelty of the sexual experience (new partner or different situation) than to the man's age.
- What causes premature ejaculation?** There are some conditions that *may* interfere with the ejaculatory process, such as changes in the prostate gland, arteriosclerosis, diabetes and neurological disorders, but most cases are caused by failure to control the ejaculatory response. Early pioneers of sexuality studies believed early sexual experiences were important in the shaping of future ejaculatory habits. They thought that because of initial nervousness and haste, unsatisfactory early sexual experiences would 'programme' a pattern of learned rapid ejaculation later on (a form of negative conditioning). Inappropriate venues and circumstances e.g., backseats of cars, fear of discovery and one-night stands may contribute to establishing a pattern of rapid ejaculation. Psychosocial events that may contribute to premature ejaculation include:
- Partner's illness
 - Occupational stress/financial stress/shift work
 - Family problems/elderly relatives/bereavement/children
 - Guilt/Sexual orientation
 - Lack of experience/opportunity

- Poor housing/overcrowding
- Performance anxiety/fear of failure/expectations
- Lack of sexual/interpersonal skills

A common reason for premature ejaculation is relationship disorders. Some of the common relationship distress are: sexually demanding partners, unrealistic expectations, discrepant needs and desires in a relationship, dissatisfaction, lack of communication and trust, affairs, partners also have a sexual dysfunction, and an excessive desire to please a partner. Derogatory remarks made at the time tend to make matters worse and can lead to a cycle of failure and anxiety.

How can I overcome premature ejaculation?

Many men can be helped to delay ejaculation, using self-help methods, but some may require help of an expert practitioner. Always discuss the problem with your partner first, to find out their needs and wishes may be. A simple self-help method that can be effective is called 'stop/start technique'. This can be done either by the man alone or with his partner whichever is preferable.

- Step 1: Gradually start stimulation of the penis, stopping just before you think you are about to ejaculate.
- Step 2: Rest, no stimulation for 30-60 seconds.
- Step 3: Begin stimulation of the penis again, stopping or reducing stimulation until the probability of ejaculation has passed.
- Step 4: Repeat above steps four or five times, until you begin to recognise the point of ejaculation. Allow ejaculation to occur.

This masturbation technique can be modified for intercourse, and is called the squeeze technique. The partner firmly squeezes the penis where the glans joins the shaft. Use the thumb and forefinger to squeeze immediately before the point of ejaculation. The sensation of impending ejaculation will subside; there may be some reduction in the degree of firmness of the erection, but stimulation begins again. A considerable commitment is required from the couple for these techniques to have any chance of success.

Do 'delay sprays' work?

There is no evidence to suggest that they do work, or that they don't. Delay sprays, which are anaesthetic sprays, may reduce the sensitivity of the tip of the penis but may interfere with the recognition of ejaculation. There is also the possibility of transferring the anaesthetic compound to the partner, thus reducing pleasurable sensations. Should you decide to purchase any of these sprays, condom use is advised.

What if I can't overcome problem myself?

No drugs have yet been licensed for the treatment of premature ejaculation. Indications suggest that some anti-depressants may be useful in certain instances, but they require further evaluation. Medication is an optional form of therapy, it should be prescribed in combination with traditional sex therapy. Couples find great difficulty approaching the subject with health care professional. Your GP may be able to put you in touch with a sex therapist. Provision of NHS service for patients who suffer with premature ejaculation is at best patchy.

An invitation....

....to enrol as a friend of The Impotence Association. For a small annual subscription, you will receive three copies of One in Ten, the Association's newsletter and you will be contributing to the Association, which helps overcome the problems of male and female sexual dysfunction. If you are interested, please telephone or write for an application form.

Helpline: 0870 7743571

Charity Registration No. 1056307