

Understanding premature ejaculation

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It's a worry for every man: While in the throes of passion, he experiences premature ejaculation.

"Premature ejaculation is the most common male sexual disorder," said Waguih IsHak, a psychiatry professor at Cedars Sinai Medical Center in Los Angeles. Luckily, it's also the easiest to treat.

"The problem is that some men don't address it, and it ends up complicating relationships," IsHak added.

The Cleveland Clinic states that between 30% and 40% of men are affected by [premature ejaculation](#), and about 1 in 5 males between the ages of 18 and 59 say they've experienced it.

Premature ejaculation is typically defined as reaching climax within one minute of penetration, and there are several psychosocial factors that can contribute to the condition—many linked to anxiety.

Money troubles, job stress and relationship problems can all contribute to premature ejaculation. To make matters worse, anxiety can be both a cause and an effect.

To better understand premature ejaculation, it is important to learn about its causes and some key treatments you can try to better manage the condition and lower the likelihood that it happens in the future.

What is premature ejaculation?

"The official definition of premature ejaculation is controlled and unwanted ejaculation within a minute or less of penetration. Personally, I think this definition is too limiting," Harvard Health chief medical editor Dr. Howard LeWine said in a recent posting.

"Of course, men need to be realistic about their expectations for staying power. But if a man is consistently ejaculating before he wants to, and it causes him distress, then he should speak with his doctor," LeWine

added.

According to the National Center for Biotechnology Information (NCBI), definitions of premature ejaculation vary. The common denominator among all of them is that ejaculation, which is the release of semen, consistently happens sooner than the man or his partner wants during sexual activity.

Premature ejaculation symptoms

The only real symptom is a lack of the ability to stop ejaculation from occurring sooner than wanted during sexual activity, according to Beacon Health System. The NCBI states that if this symptom lasts for a period of six months or longer and causes worry or stress, a premature ejaculation diagnosis may be given.

Premature ejaculation causes

A research article published recently in *Frontiers in Neuroscience* states that premature ejaculation falls into two main categories. Primary premature ejaculation starts with your first sexual experience and is lifelong. Acquired premature ejaculation develops at some point after a period of normal ejaculation.

In the study, evidence showed that men with premature ejaculation had higher brain segregation (less communication with other parts of the brain) than the [control group](#) in areas associated with ejaculation.

Primary premature ejaculation participants had higher segregation in the section of the brain associated with rapid ejaculation (the amygdala). Acquired premature ejaculation participants had higher segregation in the section of the brain associated with decreased control of ejaculation

(the [frontal cortex](#)), although they also had lower segregation in the amygdala.

Understanding what causes premature ejaculation can help you get a better grasp on the type of treatment that may be best for you, according to the Cleveland Clinic. It's a complex dysfunction, with physical, chemical and psychological factors all playing a role.

Emotional causes of premature ejaculation include:

- Relationship issues
- Stress
- Depression
- Performance anxiety

Physical and chemical causes of premature ejaculation include:

- Low serotonin or dopamine levels
- Imbalanced oxytocin, [thyroid-stimulating hormone](#) or luteinizing hormone levels
- An extra-sensitive penis
- Erectile dysfunction

Premature ejaculation treatment

For men and their partners who are wondering how to stop premature ejaculation, there are a few behavioral therapies you can try.

"We advise couples to try natural methods, such as the start-stop technique," said IsHak.

"The partner gets the man aroused and stops when the man is close to ejaculation, and the cycle starts over again. Commitment and

communication are key," he added.

LeWine said, "Stop-squeeze is somewhat similar [to the start-stop technique]. When you approach orgasm, you pause, and you (or your partner) use the thumb and two fingers to gently apply pressure just below the head of the penis for about 20 seconds. Then release the squeeze and resume [sexual activity](#)."

The Cleveland Clinic states that counseling can also be an effective treatment strategy because it allows you to work through relationship issues, life stressors and performance anxiety with a sex therapist or other professional in the field.

In addition, several premature ejaculation medications are available to help you manage underlying causes, including:

- Selective serotonin reuptake inhibitor (SSRI) antidepressants
- Topical numbing creams to reduce penis sensitivity
- Erectile dysfunction medications such as Viagra and Cialis

How to prevent premature ejaculation

Applying the treatment strategies recommended by your doctor can help you prevent premature ejaculation, according to the Cleveland Clinic.

Working together with your partner is also key. "Erectile dysfunction is emotionally loaded because it's connected to how men perceive their self-esteem," IsHak said. "Having a supportive partner is crucial."

You can discover more about premature ejaculation in the Urology Care Foundation's [patient guide](#).

More information: Jianhuai Chen et al, Potential biomarkers for

distinguishing primary from acquired premature ejaculation: A diffusion tensor imaging based network study, *Frontiers in Neuroscience* (2022).
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