Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust

Premature Ejaculation

Patient Information

Richmond Urology Unit-Leigh Infirmary

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The WWL Way

What is it?

Premature ejaculation is one of the most common sexual problems. The condition is most often described as being an inability to delay ejaculation to a point when it is mutually desirable for both partners. The definition of when ejaculation is premature is subjective. While some men have trouble controlling their orgasm upon entry, others consider five to ten minutes of penetration too little time. How long a man is able to last; is not the important factor in diagnosing premature ejaculation. The crucial issue is if a man is satisfied with the length of intercourse.

How is premature ejaculation caused?

Most men have experienced this problem at some time in their life. Premature ejaculation was once thought to be caused by drugs or certain infections such as urethritis, but we now know that it is more psychological in nature. The exact cause of the condition, however, is still not known.

1. Early Sexual Experiences. Some men have had early sexual experience that required sex to be over quickly (such as masturbating quickly to avoid getting caught by parents, having sex in a car, etc) that still persists. The majority of men gradually learn to control their orgasm, and have no lasting effect.
2. Performance anxiety. Some men will develop a longer-term anxiety toward sex, which can cause a prolonged experience with premature ejaculation. This is anxiety that is activated in sexual situations creating a vicious cycle of performance pressures. Frequently this pattern is seen in new relationships.
3. Missing internal cues. Researchers interviewed men who could last a long time sexually to discover their secrets. Unlike premature ejaculators, these men were better able to identify that point where ejaculation cannot be stopped, and take corrective action before that point is reached.
4. Low Arousal Levels or Low Sex Desire. The sexual response can be seen as proceeding through three levels: Desire, Arousal, and Orgasm. With premature ejaculation, sometimes the real problem is insufficient sexual desire to start with - or - lack of true arousal. Believe it or not, it is entirely possible for a man to have a decent erection without 100% sexual desire and even without full arousal. If this is the case, the premature ejaculator actually needs to be turned on more -not less- to allow him more control over his ejaculations.
5. Sexual behaviour is also a factor. The longer the period since last ejaculating, the quicker young men typically reach orgasm. Younger men tend to ejaculate more quickly than older men, as experience seems to be associated with ejaculatory control.

What can I do to delay ejaculation?

The best way to fight premature ejaculation is by learning how to identify and control the sensations leading up to orgasm.

Masters and Johnson Method

The Masters and Johnson method does just that. This method requires a great deal of patience and practice, but is very effective. Follow the steps below.

The best way to practice this method is with a caring lover, although you may want to start with masturbation. With your partner engage in stimulation other than penetration (like masturbation or oral sex) and gradually allow yourself to reach that point just before ejaculation. At that point, signal your partner to stop and allow yourself to partially lose your erection. Allow yourself to relax before starting again. Each time you do this, bring yourself closer and closer to orgasm until you cannot control it any longer. Repeat these steps several times to get the hang of it. Doing this a number of times on different occasions will help you learn where your point of climax is. You should practice these steps for several days before you attempt intercourse. Once you are ready to try intercourse, lie on your back and direct your partner to slowly allow you to penetrate. As soon as you feel that you are about to climax, signal to your partner to stop stimulating you. Relax for a bit, and then begin again. You should soon be able to control your ejaculation and enjoy having sex.

Although the method is extremely effective, it could take weeks before you get it just right. Remember, be patient and try not to put too much pressure on the situation. If you don't get it the first time, shrug it off and remember that you are working towards something that takes time.

Squeeze technique

The squeeze technique is really just a variation of the Masters and Johnson method, except that the assisting partner squeezes the tip or base of the penis just before the point of climax to essentially cancel the orgasm. The "squeeze" forces blood out of the penis and reduces the erection. You may want to use the squeeze technique if the Masters and Johnson method alone is not working.

Other techniques

Desensitizing creams are products which purport to lessen the sensations felt by men during intercourse so that they can last longer. The limitation that many men feel these creams have is that they make intercourse less pleasurable by decreasing stimulation.

Masturbation - Is often used by young men to increase their level of control. Some people think that masturbation before sexual intercourse will increase the amount of time a man can then last during intercourse. This technique is not very effective, however.

Condoms - Are an effective means of reducing the amount of stimulation experienced during sex. Some men find that a condom helps them prevent premature ejaculation by decreasing sensations. If one condom does not decrease the stimulation enough, then put on one more. Condoms provide excellent protection against Sexually Transmitted Diseases and pregnancy, so they're certainly worth a try.

Sexual positions - Can affect a man's ability to control his ejaculation. The typical "missionary" position (man on top of his partner) is not the best position while attempting to control ejaculation. Try lying on your back, allowing the partner to control penetration. In this position you are more relaxed, and can guide your partner easily.

Change of thrusting - You can do this by slowing the tempo of thrusting and by changing the angle or depth of penile penetration. Certain positions may allow you to last longer.

Mental work - It can be helpful for men to learn to focus more on the non-genital aspects of the sexual experience and to feel pleasure in other parts of the body. Some men claim that focusing their thoughts on something mundane like football scores or a maths problem helps them reduce sensation and hold out longer.

Medication - Can sometimes be helpful. A recent study showed that Prozac was very helpful in premature ejaculation in a high percentage of cases, as was a similar anti-depressant called Sertraline. There is also a drug called Priligy that may be beneficial.

These medications are available only after assessment by a specialist.

Impotence Association
A charitable organisation set up in 1995 to help sufferers of erectile dysfunction and their partners.

The Impotence Association
PO BOX 10296
London
SW17 72N

Help line: 0181 767 7791- Monday to Friday, 9am to 5pm

All calls are answered in strictest confidence.

Please use this space to write notes/reminders.

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Tel: 01942 822376 (Monday to Friday 9am to 4pm)

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Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

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