

Premature ejaculation (PE) – incidence and impact

PE cited as obstacle to new relationships

Australian GPs can help overcome barriers

Up to one-third of men affected by premature ejaculation (PE) believe their condition represents a significant obstacle to forming new relationships, according to research presented at the 20th Video Urology World Congress in Kuala Lumpur on 26 July 2009.

The preliminary data from a study of 5,000 men across Asia-Pacific prompted a leading Australian sexual health expert to urge general practitioners to play a more active role helping men affected by PE overcome the stigma and embarrassment attached to this common sexual dysfunction.

Dr Chris G. McMahon, Associate Professor in the Faculty of Health Services, University of Sydney and Director of the Australian Centre for Sexual Health, highlighted the significant impact of PE on a man and his partner and the apparent barriers to seeking help from a medical professional.

“Unfortunately, the situation is made worse because doctors and patients don’t talk about sexual matters as much as they should because of embarrassment or an associated stigma,” Dr McMahon said.

“What’s more,” says Dr. McMahon, “women seem reluctant to broach the subject with their men. The irony here is that many men would seek the advice of a physician if encouraged by their partner.”

Dr McMahon and other experts discussed the causes of life-long and acquired premature ejaculation, the potentially devastating emotional effect on the sufferer and his partner, as well as current and new treatment options.

The experts cited research – including the ongoing Asia-Pacific Premature Ejaculation Prevalence and Attitude (AP PEPA) Study being conducted by Harris Interactive – that reveal up to 30% of men are likely to suffer from PE at some point in their lives^{1,2}. The AP PEPA Study is being funded by Janssen-Cilag and will be released in its entirety by year end.

PE is a serious medical condition recognised by the World Health Organisation and the International Society for Sexual Medicine. Experts now agree that a combination of the following three key factors defines PE as a medical condition³:

- Ejaculation which always, or nearly always occurs prior to or within one minute of beginning intercourse;
- The inability to delay ejaculation during sexual intercourse every, or virtually every, time; and
- The negative personal consequences of distress, bother, frustration and / or avoidance of sexual intimacy for either partner.

PE is most likely caused by the ejaculatory reflex reacting to a combination of physiological and psychological stimuli in the brain and central nervous system. Serotonin plays a central role for PE as it has an inhibitory effect on ejaculation. Thus, medical opinion has determined medications that increase serotonin levels can be effective when it comes to treating PE.

The expert panel concluded that PE remains an under-detected and under-treated condition since many men do not seek medical treatment for fear of embarrassment, stigma, or the lack of awareness of how common their condition is, or because they are reluctant to discuss sexual issues with their partners or their doctors.

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References:

¹ Byers, E.S and Grenier, G. *The relationships among ejaculatory control, ejaculatory latency, and attempts to prolong heterosexual intercourse.* Arch Sex Behav, 1997. 26(1): p. 27-47.

² Palmer, N.R. and Stuckey, B.G. *Premature ejaculation: a clinical update.* Med J Aust, 2009. 188 (11): p. 662-6.

³ McMahon, C.G., et al., *An evidence-based definition of lifelong premature ejaculation: report of the International Society for Sexual Medicine Ad Hoc Committee for the Definition of Premature Ejaculation.* BJU Int, 2008; 102(3): 338-350.