

Premature ejaculation: Looking beyond a male sexual dysfunction

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Background

Definitions of PE include components of short intravaginal ejaculatory latency time (IELT), perceived lack of control and distress, i.e. negative consequences for the man and his partner. Published findings are consistent in identifying the negative psychosocial impact of PE on the man, despite differences in the definitions of PE and methodologies used. However, the effect of PE on the female partner, especially in relation to her sexual functioning, has been less well studied.

Aim of the presentation

To analyse the psychosexual impact of PE on both the man and his partner, with special focus on her sexuality, her wording, and couple' dynamics.

Methodology

Review of the relevant literature and Author's clinical experience

Results

Female partners of men with PE report significantly greater sexual problems, with reduced satisfaction, increased distress and interpersonal difficulty, and more orgasmic problems than partners of non-PE men.

Weiss and Brody' research (2009) suggests that the probability women have to reach coital orgasm (women's partnered-orgasm consistency) is correlated with the duration of the penetration (penile-vaginal intercourse). Opposite to previous beliefs, the duration of foreplay has no relation with the coital orgasm. Coital orgasm is reached by 53% of partner of EP men, vs. 78% of women in the control group (Rosen et Al, PEPA Study, 2004).

Hobbs' et Al. study (2009) showed that partners of PE men report significant loss of desire (40.3% vs. 18% in the control group), significant arousal difficulties (55.2% vs. 23.3%), significant reduction of lubrication (37.8% vs. 16.1%) and significantly more orgasmic difficulties in the intercourse (51.9 vs. 23,9) ($p < 0.0001$). Both men with PE and their partners feel control over ejaculation is the central issue in PE.

Women's wording indicate a clear polarization of attitudes and feelings towards the partner, according to the leading Male Sexual Dysfunction he is suffering from. In case of ED, women say: "What is wrong with *me*?": "I'm not beautiful enough" or "I'm not attractive enough" or "I'm not sexy enough" or "He must have another woman", with self-directed criticism. In case of PE, women's wording points to his responsibility: "What is wrong with *him*?": "Why doesn't he control himself?" or "Why does he let me down every time?!" or "Why doesn't he care about my pleasure?!" or "Why is he so selfish?" where the criticism and the aggressiveness are increasingly directed against the partner (Graziottin & Althof, 2011).

For both, the lack of control leads to dissatisfaction, a feeling that something essential is missing from the relationship, and an impaired sense of intimacy. If left untreated, the situation can lead to increased irritability, interpersonal difficulties and deepening of an emotional divide.

Conclusion

When treating a man with PE, the partner's participation should be encouraged to enable the physician to fully understand the extent of the problem, and consider other relevant factors, from her perspective and wording. In clinical practice, treatments for PE are likely to include a combination of pharmacological, psychological, sexological and/or behavioural approaches for both the man and his partner. Tips and tricks in the management of the couple with PE will be finally considered.

Key References

Graziottin and Althof. J Sex Med. 8 (4) 304-309, 2011

Hobbs et al. Int J Impotence Res 20: 512-517, 2009

Rosen et al. Poster presented at SMSNA, 2004

Weiss and Brody. J Sex Med. 6: 135-141, 2009