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## Cant ejaculate during intercourse causes

Premature ejaculation can be prevented or avoided, depending on what is causing it. Most of the time, using the behavioral methods listed below will work to prevent it. Behavioral methods Behavioral methods are helpful for more than 50% of people who have premature ejaculation. In this type of treatment, you practice controlling your ejaculation, either alone or with a partner. In the start-and-stop method, you or your partner will stimulate your penis until you feel like you are about to have an orgasm. Then the stimulation stops for about 30 seconds. Once you regain control of your response, stimulation begins again. This process is repeated 3 or 4 times before you allow yourself to have an orgasm. The squeeze method works in a similar way. When you feel like you are about to ejaculate, you or your partner will gently squeeze the head of your penis for about 30 seconds so that you begin to lose your erection. You repeat this process several times before you allow yourself to reach orgasm. In addition to using a behavioral method, you may want to try thought distractions. For example, while you're being sexually stimulated, think about the names of players on your favorite sports team. Psychological assistance Anxiety, depression, and other emotional issues can lead to premature ejaculation. For these issues, seeking the help of a psychologist, psychiatrist, or sex therapist may be helpful. Couples therapy may also help if relationship problems may be the cause. Medical treatments Several medical treatments may help people who have premature ejaculation. Some antidepressants seem to help delay ejaculation, including antidepressants called selective serotonin reuptake inhibitors (SSRIs). These antidepressants are available with your doctor's prescription. However, the U.S. Food and Drug Administration (FDA) has not approved the use of these medicines to treat premature ejaculation. Also, antidepressants may cause side effects such as nausea, dry mouth and drowsiness. Antidepressants may also decrease your desire to have sex. Your doctor can help you decide if an antidepressant is right for you. Medicines used to treat erectile dysfunction may also help prevent premature ejaculation. Your doctor may prescribe one of these medicines alone or in combination with an antidepressant. Anesthetic creams can also be used to prevent premature ejaculation. These creams are applied to the head of the penis to make it less sensitive. Usually, the cream is applied about 30 minutes before sex and then washed off once it has decreased the feeling in your penis. The cream must be washed off before sex. If it is left on, it can cause a loss of erection and vaginal numbness. For some people, simply wearing a condom can help delay ejaculation because it may make the penis slightly less sensitive. There are a number of psychological, behavioral, and physical therapies that can be used to slow ejaculation. One way is to learn how to identify and control the sensations leading up to an orgasm. The treatments we suggest include: Masters and Johnson method, Squeeze technique Anesthetic topicals, Medications, and Condoms. The Masters and Johnson Method The Masters and Johnson method will help you learn how to identify and regain control over your point of climax. We recommend that you practice this technique by yourself or with a caring partner. As you start this technique, be patient and try not to put too much pressure on yourself. Establishing control over your sexual functioning can take time. Follow the steps below to learn how the Masters and Johnson technique works: Start by engaging in other types of stimulation (like masturbation or oral sex) instead of penetration. As you start stimulating your penis, gradually allow yourself to reach the point just before ejaculation. When you reach this point, have you or your partner stop. Allow yourself to partially lose your erection and relax before starting again. Bring yourself closer and closer to orgasm each time until you cannot hold it back any longer. 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, tell your partner to stop stimulating you. Relax for a couple minutes then start the same process all over again. The Squeeze Technique This is a variation of the Masters and Johnson technique. You or your partner will squeeze the tip or base of your penis to stop your orgasm just before you reach the point of climax. The "squeeze" forces blood out of the penis and reduces the erection. This technique can be done alone or in conjunction with the Masters and Johnson method. Men can also learn how to increase their level of control through other techniques such as: masturbation training, changing positions during sex, and in some men, ejaculation prior to sex to increase how long they last. Anesthetic Topicals Over-the-counter gels, creams, and sprays are available to decrease penile sensation and help men last longer. However, many men experience less pleasurable intercourse because these topical treatments decrease penile stimulation. The topicals can also be transferred to a partner during sex, which results in a decreased sensation for her or him. Medications Certain medications can be used to delay ejaculation or slow down orgasms such as: Antidepressants like selective serotonin reuptake inhibitors (SSRIs) or tricyclic antidepressants (TCAs), Tramadol, a weak narcotic painkiller, or Viagra or Cialis (for men diagnosed with both erectile dysfunction and premature ejaculation). Condoms Condoms can reduce penile stimulation during sex. If one condom does not work then additional condoms can be used together with desensitizing gels, creams, or sprays. Some condoms even come pre-treated with desensitization. Treatments to Avoid There are a number of treatment options men may come across when researching treatments for premature ejaculation on the internet. However, there is little evidence that show they work. These treatments include: Hormone therapies, Botox injections, Penile nerve ablation, Acupuncture, Herbal medicines, and Other drugs such as pseudoephedrine (Sudafed), etc. Premature ejaculation occurs when a man has an orgasm and ejaculates earlier during intercourse than he or his partner would like. It's a common problem, affecting 30% to 40% of men. Causes include physical problems, chemical imbalances and emotional/psychological factors. Treatments include learning techniques to delay ejaculation, counseling and medications. Premature Ejaculation Premature ejaculation is a type of sexual dysfunction that occurs when a man has an orgasm and releases (ejaculates) semen sooner than he or his partner would like. It often happens before or shortly after penetration during intercourse. Premature ejaculation can be a frustrating experience for both you and your sexual partner and makes your sex lives less enjoyable. However, the good news is that it's usually fixable! How common is premature ejaculation? Between 30% and 40% of men experience premature ejaculation at some point in their life. According to the American Urological Association, premature ejaculation is the most common type of sexual dysfunction in men. About one in five men between the ages of 18 and 59 report incidences of premature ejaculation. What time frame medically defines a man's ejaculation as premature? Although the definition of premature ejaculation varies, the American Urological Association defines ejaculation as "premature" if it occurs sooner than desired, either before or shortly after penetration, causing distress to either one or both partners. The American Psychiatric Association defines three levels of severity (mild, moderate, severe), based on time to ejaculation, with mild being under one minute. If pressed for a time frame, many doctors would define prematurity as ejaculation within a minute of beginning intercourse. Despite professional opinions, your feelings as to what is premature are also considered. Physical, chemical and emotional/psychological factors cause premature ejaculation. Physical and chemical problems include: An underlying erectile dysfunction diagnosis. A hormonal problem with oxytocin levels, which has a role in sexual function in men. Other hormone levels that play a role in sexual function include luteinizing hormone (LH), prolactin and thyroid stimulating hormone (TSH) Low serotonin or dopamine levels, chemicals in the brain that are involved in sexual desire and excitement. A penis that is extra sensitive to stimulation. Emotional or psychological causes include: Performance anxiety. Could be due to the nervousness of being with a new partner, anxiousness of having sex again after a long period of abstinence, guilt, being overly excited or stimulated or other reasons. Stress. Relationship problems. Depression. Are there other symptoms of premature ejaculation? No. The only symptom of premature ejaculation is the condition itself. If you have frequent premature ejaculations, or if premature ejaculation is causing you anxiety or depression and affecting your relationship, make an appointment to see a urologist. Your urologist will begin an exam by asking about your sexual experiences. You will likely be asked: How long have you had this problem? Under what circumstances does it happened? How often does it happen? Does premature ejaculation happen at every sexual attempt? Does it happen with all partners? Does premature ejaculation occur when you masturbate? Do you have trouble maintaining an erection? While the questions are personal, it is important that you answer your urologist honestly so they can best diagnose the source of your problem. Your urologist will also ask about any other medical conditions you may have and any medications including over-the-counter medications, supplements and herbal products you are taking. You will also be asked about any alcohol and illegal drug use. Are lab tests needed to make the diagnosis of premature ejaculation? Lab tests are usually not needed unless your healthcare provider suspects that an underlying health problem is contributing to the problem. There are many different treatments options for premature ejaculation depending on the cause. These include behavioral therapy, counseling and medications. Most causes of premature ejaculation are usually treated first with behavior therapy and/or counseling to help with emotional concerns, performance anxiety or stressors that may be contributing. Often more than one treatment approach may be tried at the same time. Behavioral therapy Behavioral therapy involves trying different methods to delay your orgasm. Its goal is to teach you how to control your body and your feelings. Methods include: Start and stop: With this technique, you or your partner stimulates your penis close to the point of orgasm then stops the stimulation for about 30 seconds until you regain control of your response. Repeat this "start and stop" approach three or four times before allowing yourself to orgasm. Continue practicing this method until you have gained good control. Squeeze therapy: With this technique, you or your partner stimulates your penis close to the point of orgasm then gently squeezes the head of your penis for about 30 seconds so that you begin to lose your erection. Repeat this technique a few times before allowing yourself to orgasm. Continue practicing this technique until you have gained control in delaying your orgasm. Distracted thinking: With this technique, the idea is to focus your attention on ordinary nonsexual things while you're being sexually stimulated. Naming sequences are a good way to focus your attention. For example, visualize naming all the businesses you pass on your drive to the gym, naming all the players on your favorite sports team or naming all the products on the aisles of your favorite store. Counseling If the cause of your premature ejaculation is psychological, emotional, or due to relationship issues - due to performance anxiety, depression, stress, guilt, or a troubled relationship - seek the help of a psychologist, psychiatrist, couples therapist or sex therapist. Your urologist can help direct you to these health professionals. Medications Several types of medications may be tried. Antidepressants, especially selective serotonin reuptake inhibitors like citalopram (Celexa®), escitalopram (Lexapro®), fluoxetine (Prozac®), paroxetine (Paxil®) and sertraline (Zoloft®) or the tricyclic antidepressant clomipramine (Anafranil®), can help delay premature ejaculation. This is an "off-label" use (not approved by the Food and Drug Administration for this use). Be sure to discuss the side effects of this medication with your urologist to be sure it's appropriate for you. Anesthetic (numbing) creams and sprays applied to the head and shaft of the penis is another medication option to delay ejaculation. The anesthetic cream or spray is applied to the penis, absorbed for 10 to 30 minutes or until you feel less sensitivity in your penis. It's important to wash your penis before sex to prevent numbness to your partner's vagina or loss of your erection. Erectile dysfunction medications, which include sildenafil (Viagra®), tadalafil (Cialis®), vardenafil (Levitra®) and Avanafil (Stendra®), have also been used to treat premature ejaculation, particularly in men with underlying erectile dysfunction. Are lab tests needed to make the diagnosis of premature ejaculation? Lab tests are usually not needed unless your healthcare provider suspects that an underlying health problem is contributing to the problem. Yes, you likely can! By following the techniques described in this article to delay ejaculation, taking any prescribed medications, and seeking counseling if needed, premature ejaculation can become a problem of your past. There are several treatment methods that can help prevent premature ejaculation. By involving your partner and seeing the appropriate healthcare professionals - a urologist for initial assessment plus other health care professionals (psychologists, psychiatrists, counselors) as needed for underlying contributing problems, you will likely be able to control your ejaculation and enjoy your sex life once again. Yes. Wearing a condom can decrease sensitivity to your penis and help delay ejaculation. Is premature ejaculation harmful or a sign of a medical problem? Premature ejaculation itself is not harmful but other health problems may contribute to the development of premature ejaculation. These health problems include: Erectile dysfunction (man can't maintain a firm erection for intercourse). Chronic pelvic pain syndrome (long-term pain and cramping in the pelvic area plus long-term urinary tract symptoms and sexual dysfunction). Thyroid disorders. Recreational drug use. What's the difference between erectile dysfunction and premature ejaculation? If you have erectile dysfunction, you can't attain or maintain your erection. If you have premature ejaculation, you have an erection but you reach orgasm and ejaculate earlier than you or your partner would have liked. However, erectile dysfunction can actually lead to the development of premature ejaculation. This happens when a man knows his ability to sustain an erection is poor, so he develops the habit of ejaculating soon after erection before he loses his erection. Because of this connection between these two conditions, your urology will want to figure out if you have erectile dysfunction and, if so, treat that first. Can drinking alcohol help delay ejaculation? While it's true that drinking alcohol can delay orgasm, it's not a treatment for premature ejaculation. A note from Cleveland Clinic Your urologist and team of healthcare providers will come up with a plan to treat your premature ejaculation. Premature ejaculation is often easily treated with a few simple steps, so it is important to see your urologist or other doctors if you are experiencing premature ejaculation. Although it may be uncomfortable to talk with your doctors about sexual problems, know that they are professionals and want you and your partner to have a satisfying sex life. Remember, this is a common problem and you are not alone! Last reviewed by a Cleveland Clinic medical professional on 08/07/2020. References American Urological Association. Urology Care Foundation. Accessed 8/4/2020.Premature Ejaculation. ( American Academy of Family Physicians. Familydoctor.org. Accessed 8/4/2020.Premature Ejaculation. 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