

# Premature Ejaculation: A Psychophysiological Review

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*This review examines the most common male sexual dysfunction, premature ejaculation (PE). The prevalence, classification, neurophysiology, neuropharmacology, and psychological studies that offer evidence useful for understanding and clinically evaluating PE are reviewed. It is proposed that there are two basic kinds of PE: biogenic and psychogenic. Studies reporting pharmacological aspects of ejaculation offer some suggestions regarding the mechanisms of ejaculation as well as possible pharmacologic aid for some premature ejaculators. The traditional assumption among sex therapists that PE is almost universally caused by psychological features, and easily treated with sex therapy behavioral techniques, is drawn into question. Based on the limited available results from systematic investigations, behavioral treatments for PE remain beneficial to only a minority of men three years after treatment ends, suggesting that this male dysfunction is difficult to treat effectively. The mediocre results reported in treatment outcome studies may be due, in part, to reports on heterogeneous groups of premature ejaculators, for whom treatment has been generalized rather than targeted to the specific type of PE. We propose a biological and psychological etiology. With more discriminating assessment and more specific diagnosis of PE, and with treatment designed to address the particular type of PE, long-term outcome should improve for this common sexual dysfunction.*

While surveys among different populations vary considerably, epidemiologic studies suggest that premature ejaculation (PE) is the most common male sex dysfunction, with a prevalence rate between 1 and 75

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