What is ejaculation?

Ejaculation is the release of semen from the penis at orgasm (sexual climax). When a man is sexually stimulated, the brain sends signals to the genital area through nerves in the spinal cord to make the pelvic muscles contract.

At orgasm, waves of muscle contractions transport the sperm, with a small amount of fluid, from the testes through to the vas deferens. The seminal vesicles and prostate contribute extra fluid to protect the sperm.

This mixture of sperm and fluid (semen) travels along the urethra to the tip of the penis where it is ejaculated (released).

What are ejaculation problems?

Men can experience different kinds of ejaculation problems, including:

- premature ejaculation
- retrograde ejaculation
- delayed ejaculation (or no ejaculation)
- painful ejaculation.

How common are ejaculation problems?

Premature ejaculation is the most common male sexual problem and affects men of all ages.

Premature ejaculation is more common in younger men where it is known as a neurobiological disorder. Ejaculation generally takes longer as men get older. Younger men may be less sexually experienced or feel less secure with the situation in which they are having sex and this may contribute to the premature ejaculation.

What causes ejaculation problems?

Ejaculation problems can have a variety of causes, both physical and psychological. Physical causes include some illnesses such as diabetes, some types of surgery or trauma, some types of inflammation or infection, certain medicines, and chemical imbalances in the brain (neurobiological disorders). Psychological causes include stress, anxiety (such as anxiety about ‘sexual performance’), relationship difficulties and depression. For each type of ejaculation problem and for each individual man there may be one or more causes of an ejaculation problem.

More details about premature ejaculation can be found in a separate Andrology Australia fact sheet.

The other ejaculation problems are less common than premature ejaculation but can also cause distress for the man and his partner.
What should I do if I have an ejaculation problem?
If you have an ejaculation problem that is bothering you, a discussion with your local doctor (GP) is the best place to start to find out the cause of the problem and how it may be treated or managed. The GP may refer you to a specialist if needed.

What about partners?
Talking to your partner can be helpful, particularly if you are feeling anxious about your ejaculation problem. When seeking treatment, involving your partner is also a good idea. In some cases partners have their own sexual problems that may need to be managed.

RETROGRADE EJACULATION

What is retrograde ejaculation?
In men with retrograde ejaculation, the muscle at the opening of the bladder, which usually stops semen from entering the bladder during orgasm, does not close normally. When the muscle does not close properly semen flows back into the bladder. Therefore, little or no semen is discharged from the penis during ejaculation, and the first urination after sex looks cloudy as the semen mixes with the urine.

Retrograde ejaculation is uncommon and usually harmless.

What causes retrograde ejaculation?
Retrograde ejaculation can happen after surgery to the prostate or the neck of the bladder. Diabetes, multiple sclerosis, spinal cord injury, and some medications, in particular medicines for high blood pressure and medicines to treat benign prostate enlargement can also cause retrograde ejaculation. Depending on the cause, retrograde ejaculation may be a temporary or permanent condition.

How is retrograde ejaculation treated?
Most men with retrograde ejaculation do not need treatment. The important message is that it does not cause serious problems. However, it is difficult for men with retrograde ejaculation to have a baby naturally.

For men wishing to have a family, sperm may need to be collected in other ways for use in assisted reproduction procedures such as in vitro fertilisation (IVF).

A fertility specialist can take sperm from the urine, or take sperm directly from the testes in a small operation (biopsy).

DELAYED EJACULATION

What is delayed ejaculation?
Delayed ejaculation and anorgasmia describe the inability to ejaculate at will, so that ejaculation (and orgasm) takes much longer than desired, or does not happen at all. This might happen only with intercourse, or in all situations including masturbation.

The term anejaculation describes when a man does not ejaculate after orgasm. “Orgasm” and “ejaculation” are often thought to be the same, but some men can experience orgasm even though they don’t ejaculate.

What causes delayed ejaculation?
Physical causes include spinal cord injury, major lymph node surgery, diabetes, multiple sclerosis and traumatic injury to the pelvic region, when the nerve supply is affected.

Delayed ejaculation is a well-documented side-effect of some antidepressants (specifically SSRIs). While delayed ejaculation can be caused by relationship difficulties, persistent anorgasmia with no medical cause is very uncommon.
How is delayed ejaculation treated?

A change of antidepressant medication may be needed for men who are concerned about this side-effect.

Vibrator stimulation and electrical stimulation of the penis can be used to promote reflex ejaculation in men who can’t ejaculate, but want to father a baby.

Men who are concerned about being unable to ejaculate when there is no medical reason for this difficulty may need long-term individual counselling or therapy.

PAINFUL EJACULATION

What is painful ejaculation?

Painful ejaculation is when painful, burning sensations are felt during or following ejaculation.

During ejaculation, pain can be felt in the perineum (the area between the anus and the genitals) and the urethra (a tube that runs from the bladder to the end of the penis). The condition can cause discomfort in the testes and interfere with sexual pleasure.

What causes painful ejaculation?

Any condition that causes inflammation or an infection of the organs involved in ejaculation or the surrounding structures, such as prostatitis, may cause painful ejaculation.

How is painful ejaculation treated?

The treating doctor should assess the cause of the pain and treat as appropriate. The treatment might be a course of antibiotics for infection, or it might need referral to a specialist (urologist) for more complex investigations.

Where can I find information about other sexual problems?

Andrology Australia has fact sheets on other sexual problems including ‘Premature ejaculation’, ‘Erectile dysfunction’ and ‘Low libido’. See our website for the full range of fact sheets.

Visit healthymale.org.au or speak to your doctor for more info.