

# British Society for Sexual Medicine (BSSM)

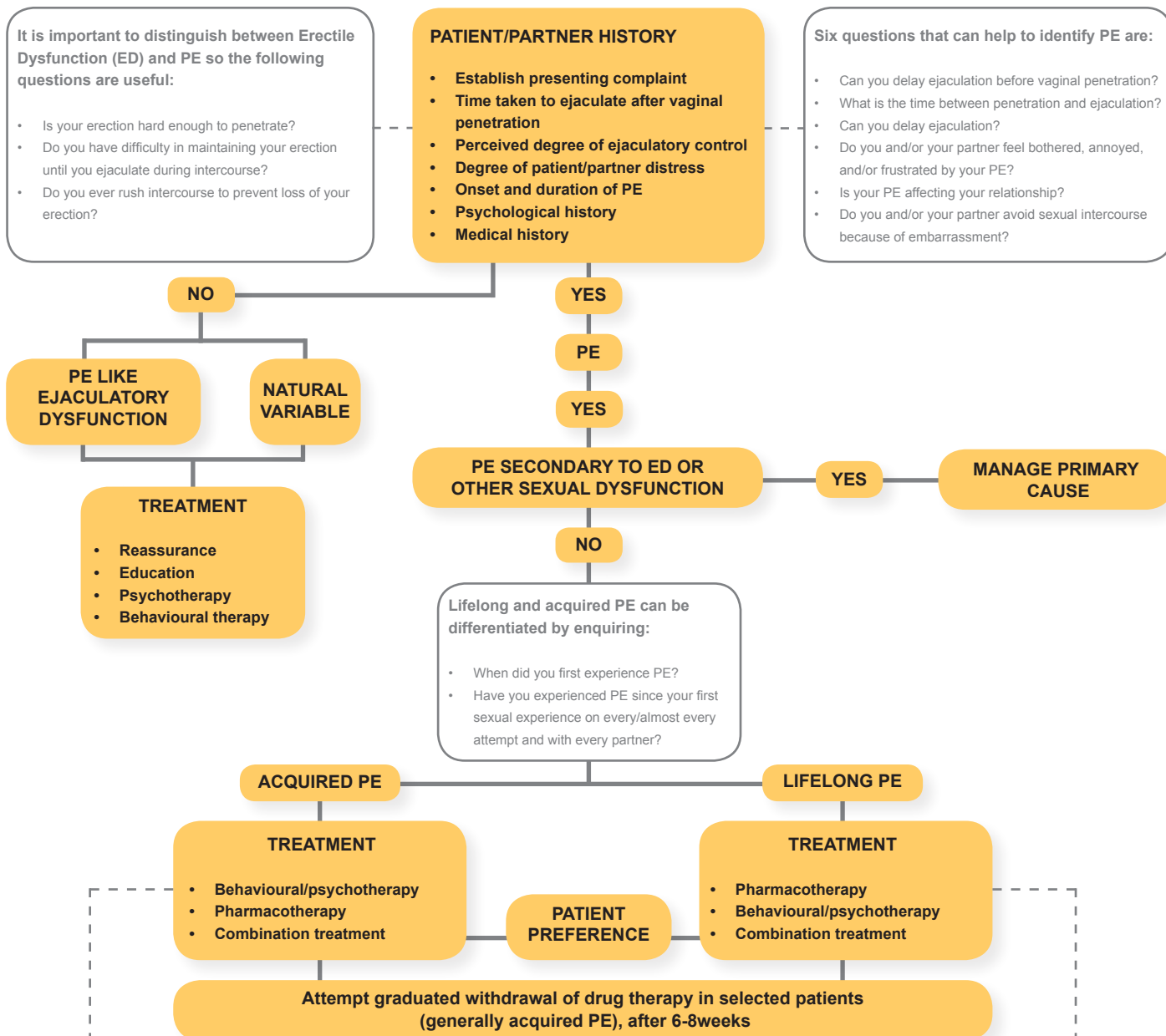
## Treatment Algorithm for Premature Ejaculation (PE) July 2013



Although reliable information on the prevalence of lifelong and acquired PE is lacking when based upon patient self-report, PE is the most common male sexual dysfunction. Lifelong PE is defined as:

*'A male sexual dysfunction characterised by ejaculation which always or nearly always occurs prior to or within about one minute of vaginal penetration and the inability to delay ejaculation on all or nearly all vaginal penetrations, and negative personal consequences, such as distress, bother, frustration and/or the avoidance of sexual intimacy.'*

To help you manage PE appropriately, we have proposed the following algorithm to guide you through the treatment options.



### TREATMENT OPTIONS

#### Pharmacotherapy

##### Oral therapies:

- Short half-life on demand SSRIs specifically suggesting a role in treating PE e.g. dapoxetine - which is the only oral licensed medication for the treatment of PE
- Off label SSRIs and TCAs that have been used as a daily treatment for PE e.g. paroxetine, sertraline, fluoxetine, citalopram and clomipramine
- PDE5 inhibitors used on demand as a combination treatment with SSRIs, when PE co-exists with ED
- Tramadol, an opiate derivative (usually used as an analgesic) but could be used where PE co-exists with a need for analgesia

##### Topical therapies:

- Off label lidocaine/prilocaine

#### Behavioural/psychological

Therapies have been incorporated for a number of years but quantitative research shows benefit is not forthcoming. Nevertheless many patients are understandably anxious and may appreciate psychotherapy.

Algorithm is based on guidance from The International Society of Sexual Medicine (The Journal of Sexual Medicine 2010; 7:2947-2969)