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MALE ORGASM

The male orgasm is a complex experience. The major function of the male orgasm is to ejaculate sperm, although not all men will ejaculate during an orgasm. Beyond delivering pleasure, the role of the female orgasm is less clear, although it may help move the sperm closer toward the ovum (egg).

Physiology

The male orgasm is a complex system involving multiple hormones, organs, and nerve pathways. The hormone testosterone, produced in the testicles, plays a central role by enhancing the sexual desire (libido) that leads to arousal, erection, and ultimately orgasm. By contrast, low testosterone not only decreases a man's energy and mood, it makes him less responsive to sexual stimuli, both physical and mental.¹

With that being said, a man often only requires physical stimulation to achieve arousal, while women typically need physical and mental stimulation to achieve the same.

Men differ from women in that their orgasms—the climax of the sexual response—come on faster and is shorter than women's. By and large, the male orgasm will last for five to 10 seconds. Women will last 10 to 15 seconds on average, although some have reported orgasms that last as long as a minute (a

virtual impossibility for men).

The male ejaculate, semen, is comprised of sperm cells and seminal fluid, the latter of which contains phosphorylcholine (an enzyme that aids in fertility) and fructose (which provides fuel for sperm). The average volume of semen expelled by a healthy man is around a teaspoon.

Four phases of male orgasm

The route to ejaculation in men is actually delineated by four distinct phases, of which orgasm is the third. While the duration and intensity of these phases can vary, the experience will proceed in a strictly specific way.

1. Arousal

This, in turn, triggers the release of nitric oxide into the arteries of the penis, causing them to expand and rapidly fill with blood. The resulting erection is generally accompanied by changes in respiration, increased overall muscle tension, and the retraction of the scrotal sac.

2. Plateau

Plateau is the phase immediately preceding orgasm in which the voluntary thrusts of the body, specifically the pelvis, suddenly become involuntary, increasing both in intensity and speed.² It is at this stage that the heart rate increases to between 150 and 175 beats per minute, accompanied by a marked rise in blood pressure and body temperature.

3. Orgasm

The orgasm phase is divided into two parts. The first, known as emission, is the stage where ejaculation is inevitable. This is immediately followed by the second stage, ejaculation, in which strong contractions of the penile muscle, anus, and perinea muscles help propel the semen from the body.

4. Resolution and Refraction

Resolution is the phase following orgasm where the penis starts to lose its erection. This is often accompanied by feelings of extreme relaxation or even drowsiness.

Refraction, also known as the refractory period, is the stage following climax when a man is unable to achieve another erection even with stimulation. In younger men, the refractory period may be as short as 15 minutes. In older men, it may last as long as an entire day.

Male Multiple Orgasms

"Multiorgasmic" is a term used to describe the ability to have more than one orgasm within the span of minutes or seconds.⁵ The orgasm may not involve actual ejaculate but must include the physiological and emotional components of ejaculation.

The multiorgasmic state can be classified in one of two ways:

- **Condensed**, in which two to four individual and defined orgasms occur within a few seconds to two minutes
- **Sporadic**, in which refraction is delayed and multiple orgasms can be achieved within the span of several minutes

Beyond age, there are several factors commonly noted in multiorgasmic men. These include the use of psychoactive drugs, having multiple partners, having novel sex partners, and the use of sex toys to enhance tactile stimulation.

⁶What this suggests is that the ability to achieve multiple orgasms is the result of a heightened state of arousal rather than any unique hormonal or physiological response.

FERTILITY

Fertility is about the ability to get pregnant. More than 8 out of 10 couples where the woman is aged under 40 will get pregnant within one year if they have regular unprotected sex. More than 9 out of 10 couples will get pregnant within 2 years.

Lifestyle and fertility

Your fertility is affected by your lifestyle. These are the top lifestyle tips for improving your fertility.

- Don't smoke. Smoking ages your ovaries and your eggs and is linked to lower fertility.
- Cut down on alcohol. Heavy drinking is linked to lower fertility.
- Keep caffeine intake below 200 mg a day.
- Stay active. Being moderately active has been shown to help with fertility
- Stay away from illicit drugs.
- Be a healthy weight.

When to get help with fertility

Infertility is only usually found out when a couple haven't managed to get pregnant. Make an appointment with your GP if you haven't conceived after a year.

You should see your GP sooner if:

- you are over 36 (fertility deceases with age)
- you have a known fertility issue, such as endometriosis (link) or polycystic ovary syndrome (PCOS)
- your partner has a known fertility issue, such as low sperm count
- you are concerned you or your partner may have a medical issue that may be affecting your ability to get pregnant
- you have irregular or no periods.

Causes for infertility or reduced fertility

- Ovulation problems
- Endometriosis
- Poor egg quality
- Polycystic ovarian syndrome (PCOS)
- Fallopian tube problems

- Unexplained infertility
- Poor sperm quality
- Age
- Premature ovarian insufficiency

What is unexplained infertility?

Unexplained fertility is when no reason has been found for a person's fertility problems. In this case you should not be offered any fertility drugs taken by mouth as this does not improve the chances of conceiving naturally. Unexplained fertility is more likely if you are over 36 than if you are under. If you have been trying to conceive naturally for more than two years (including the year before your fertility tests) you may be offered IVF.

FERTILITY TEST

Tests for men

Men should be offered a semen test to measure the quantity and quality of their sperm.

Tests for women

Fertility tests for women may include:

- blood tests to check your hormone levels
- tests (including blood tests) to see how well your ovaries may respond to fertility drugs
- an examination to see whether your fallopian tubes are blocked.

Fertility treatment

This will depend on what's causing the problems and what's available in your local area.

There are three main types of fertility treatment:

- drugs to improve ovulation
- surgery if there are blockages or growths in the reproductive system
- assisted conception including intrauterine insemination (IUI) and in vitro fertilisation (IVF)