neurons by 5-HT transporters, resulting in enhanced 5-HT neurotransmission and stimulation of post-synaptic membrane 5-HT receptors.

Keywords: Premature ejaculation (PE); tricyclic antidepressant (TCA); phosphodiesterase type 5 inhibitors (PDE5i)

doi: 10.21037/tau.2017.s012

Cite this abstract as: Hyun JS. Update on treatments for premature ejaculation. Transl Androl Urol 2017;6(Suppl 3): AB012. doi: 10.21037/tau.2017.s012

AB013. Diagnosis and treatment of premature ejaculation

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Abstract: The definition of premature ejaculation has not yet been agreed upon in the international community, which can be divided into primary premature ejaculation, secondary premature ejaculation, variability premature ejaculation and premature ejaculation likely erectile dysfunction. The diagnosis can be carried out based on the patient's medical history, the sexual evaluation table and the neurological examination of the premature ejaculation in China, Neurologic examination including the sensory evoked potentials of the penile dorsal nerve (DNSEP) and the sensory evoked potentials of the penis glans (GPSEP). Treatment methods can choose psychological counseling, behavioral therapy, drug therapy and surgical treatment. Drug therapy including topical drugs, serotonin reuptake inhibitors (SSRi), receptor blockers, type 5 phosphodiesterase inhibitors (PDE5i), etc., of the latest medications can choose hydrochloric acid of dapoxetine (Priligy) treatment.

Keywords: Premature ejaculation diagnosis treatment

doi: 10.21037/tau.2017.s013

Cite this abstract as: Gao B, Zhang Z, Yuan Y, Peng J, Xin Z, Guo Y. Diagnosis and treatment of premature ejaculation. Transl Androl Urol 2017;6(Suppl 3):AB013. doi: 10.21037/tau.2017.s013

AB014. Clinical observation on systematic desensitization therapy for 35 cases of simple premature ejaculation

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Background: Explore new treatments for patients with simple premature ejaculation.

Methods: Thirty-five patients with simple premature ejaculation were treated by desensitization under the assistance of desensitization machine, and no local anesthetics or oral medicine were used to treat premature ejaculation. We observe the total time of sex life and Single vaginal pumping time before and after treatment; another method is for the absence of frequent sexual partners to compare the time and number of pumping on the treatment machine were compared before and after treatment.

Results: After 1 or 6 treatments, 35 patients achieved satisfactory results. The total time of sexual life was extended from less than 1 to 20–30 minutes; Single vaginal pumping times were increased by less than 50 times to 500 or more times in husband and wife's lives, and 1,000 or 2,000 times on the desensitization machine. The effective rate of the patients currently treated is 100%.

Conclusions: Systematic desensitization, out of the way drugs used to treat simple premature ejaculation, brought the gospel for many patients, also provide this method for the treatment of patients with premature ejaculation or without frequent sexual partners, is a very simple and effective treatment method.

Keywords: Simple premature ejaculation; systematic desensitization