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Nota di bibliografia	Includes bibliographical references and index.
Nota di contenuto	Introduction -- History of PE -- Anatomy And Physiology Of Ejaculation -- Epidemiology Of Premature Ejaculation -- Taxonomy of ejaculatory disorders and definitions of Premature Ejaculation -- Pathophysiology Of Lifelong Premature Ejaculation.-Pathophysiology Of Acquired Premature Ejaculation -- Risks factors in Premature Ejaculation: The intrapsychic risk factor.-Risks factors in Premature Ejaculation: The genetic risk factor -- Twin Studies and Quantitative Genetics in Premature Ejaculation Research -- Risks factors in Premature Ejaculation: The relational risk factor -- Endocrine control of ejaculation.-Risks factors in Premature Ejaculation: The urological risk factor -- Risks factors in Premature Ejaculation: The neurological risk factor and the local hypersensitivity -- Risks factors in Premature Ejaculation: Experimental psychology in the evaluation of PE -- Patient Reported Outcomes Used in the Assessment of Premature Ejaculation -- Treatment Of Premature Ejaculation With Cognitive Behavioural Therapy -- The psychodynamic approach to Premature Ejaculation.- Treatment Of Premature Ejaculation With Selective Serotonin Re-Uptake Inhibitors (SSRIs) -- Treatment Of Premature Ejaculation With

Dapoxetine -- Use of local anaesthetics in the treatment of premature ejaculation -- Secondary PE -- Treatment Of Premature Ejaculation And Comorbid Endocrine and Metabolic diseases.-Complementary, surgical, and experimental modalities for management of premature ejaculation -- From Diagnosis to Treatment: The Office Management of Premature Ejaculation -- Clinical Trial Designs For Premature Ejaculation Observational, Intervention and Intervention Preference Studies -- Future Treatments Of Premature Ejaculation -- Appendix: psychometric tools for premature ejaculation and related erectile dysfunction.

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Sommario/riassunto

Premature ejaculation (PE) is a common male sexual complaint, with a self-reported prevalence of 20–30% in observational studies. Over the past 10–20 years, our understanding of PE has evolved from the initial premise that it is a psychological disorder to the current recognition of an underlying biological and probably genetic predisposition in many cases. This new understanding has been accompanied by novel approaches to the assessment and treatment of patients with PE. Premature Ejaculation is the first truly contemporary reference volume on the subject. It covers a broad range of aspects relevant to PE, including past and current definitions of the condition, the etiology of PE, its epidemiology, the impact of PE on both the patient and his partner, and the treatment of PE using pharmacotherapy and/or psychotherapy/cognitive behavioral therapy. The book is well illustrated and referenced, and the primary focus throughout is on evidence-based medicine. This timely and authoritative volume will be of great value to sexual health physicians, andrologists, endocrinologists, urologists, psychiatrists, sexologists, psychologists, and other interested healthcare professionals.

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