



GPH INTERNATIONAL JOURNAL
**Research in
Biological Science**
www.gphjournal.org | editor@gphjournal.org



doi 10.5281/zenodo.13291565

Vol. 07 Issue 07 July - 2024

Manuscript ID: #01449

RISING INCIDENCE OF WEAK ERECTION AMONG MALES IN SOUTH-SOUTH NIGERIA

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Abstract:

Erection is an important aspect of manhood and it brings joy to every man who has attained puberty. Erection can save a man from committing suicide. However, weak erection has become rampant among men and this is a global threat because it can lead to several conditions. The aim of the study is to investigate The Rising Incidence of Weak Erection Among Males in South-South Nigeria. This was a cross-sectional study involving 480 males who were within the age of 18 to 47 years. A well-structured questionnaire was administered to participants. Each participant had one questionnaire to fill appropriately and independently after instructions were given to them by the Research Assistants. The study lasted for a period of 3 months. The results of the study revealed that, majority (47.9%) of the participants were between 33-37 years and 58.3% of the participants had tertiary education. The study also revealed that 37.5% of the participants were married, 50.0% were single, and 12.5% were divorcee. The participant's occupation shows that 18.8% of them are farmers, 20.8% are business men and 47.9% are civil servants. The shows that 62.50% of the participants consumed alcohol and 37.5% do not consumed alcohol, 62.5% depends on drug and 37.5% do not depends on drug, 62.5% took aphrodisiac substance and 37.5% do not. The study also revealed that 79.2% were diabetic while 20.8% were not diabetic, 62.5% had high cholesterol in their body while 37.5% did not have high cholesterol level in their body, 83.3% took herbal medicine while 16.7% do not and 83.3% of the participants had weak erection while 16.7% did not. The statistical analysis was carried out using Statistical Package for Social Science (SPSS) version 23

Keywords:

Rising, Incidence, Weak, Erection, Males



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Introduction

Erectile dysfunction has remained as one of the major global health issues (Asmerom, et al, 2021). It has remained one of the major global health issues which is usually attributed to age, diabetes mellitus, smoking, cardiovascular diseases, kidney disease, previous operations, psychological factors, and drugs (Birowo, 2019; Mobley, et al, 2017). Erectile dysfunction which could also be refer to as “impotence,” is the repeated inability to get or keep an erection firm enough for sexual intercourse (NIH, 2003;www.impotence.org). The word “impotence” may also be used to describe other problems that interfere with sexual intercourse and reproduction, such as lack of sexual desire and problems with ejaculation or orgasm (NIH, 2003). Erectile dysfunction is the total inability to achieve erection, an inconsistent ability to do so, or a tendency to sustain only brief erections (premature ejaculation), (Roper, 2001). Impotence is the inability to finish sexual intercourse due to lack of penile erection (Pamplona-Roger, 2000). The estimated range of men worldwide suffering from ED is from 15 million to 30 million (NIH, 2003). The causes of ED vary from one individual to another. For whatever cause, since an erection requires a precise sequence of events, ED can occur when any of the events is disrupted. This sequence includes nerve impulses in the brain, spinal column, and area around the penis, and response in muscles, fibrous tissues, veins, and arteries in and near the corpora cavernosa (NIH, 2003). These are often as a result of diseases, such as diabetes, kidney disease, chronic alcoholism, multiple sclerosis, atherosclerosis, vascular disease, and neurologic diseases that account for about 70 percent of ED cases (NIH, 2003). Nevertheless, psychological factors such as stress, anxiety, guilt, depression, low self-esteem, and fear of sexual failure cause 10 to 20 percent of ED cases. In addition, men with a physical cause for ED frequently experience the same sort of psychological reactions (stress, anxiety, guilt, depression) (NIH, 2003). Other possible causes are smoking, which affects blood flow in veins and arteries, and hormonal abnormalities, such as not enough testosterone (NIH, 2003). In modern medication of erectile dysfunction, the oral prescription medication of popular Viagra (Sildenafil) is effective, but in some men it is not compatible and Sildenafil works in less than 70% of men with various etiologies and has certain side effects (NIH, 2003). Previously, about 52% of ED in men was seen in the age range of 40 to 70 years (Mobley, et al, 2017). However, recent studies reported that ED is becoming highly prevalent even under the age of 40 (Nguyen, et al, 2017). In Africa, around 71.45% of people with diabetes developed ED (Shiferaw, et al, 2020). Erectile dysfunction can be managed nonpharmacologically via controlling plasma glucose levels and lipid profiles, avoiding smoking and alcohol drinking, psychological therapy, physical exercising, and external devices (Diniz, et al, 2020; Was sersug and Wibowo, 2017). Pharmacologically, it can be treated with different drugs including phosphodiesterase type 5 inhibitors (PDE5-Is), such as sildenafil, vardenafil, and tadalafil; apomorphine; and synthetic prostaglandin E1 (alprostadil), phentolamine, and papaverine (Diniz, et al, 2020; Kim, et al, 2021). Androgens have a strong influence on the sexual desire of men. A loss of libido may indicate androgen deficiency on the basis of either hypothalamic, pituitary or testicular disease (Burnett, et al, 2018). This definition better encompasses the full spectrum of activity that is affected by ED (Figure 1), as opposed to definitions considering only vaginal penetration. Sexual health is an important determinant of quality of life (Pozzi, 2018). Today, millions of men (young and old) suffer from ED due to high levels of synthetic hormones (Xenoestrogens) in our diet/environment, nutritionally imbalanced diet resulting from poor quality of produces and extremely low levels of testosterone. ED is a pervasive problem among men worldwide. According to World Health Organization ‘Sexual health is fundamental to the physical or emotional health and wellbeing of individuals, couples and families and to the social or economic development of communities and countries (Kalka, et al, 2018). ED affects the quality of life for both patients and partners and is associated with relationship difficulties (Jisheng, et al, 2017; Rongmin, et al, 2018; Kaminetsky, et al, 2017; Wang and Wang, 2017).

Erection is a complex, involuntary, neuropsychological, hormone mediated vascular event that happens when blood flows rapidly into the penis and becomes trapped in its spongy chamber (Figure 5). Its precise erudition may add to the comprehension of the physiological phenomenon, comprising libido, erection, copulation, orgasm and the ejaculation (Ahlers, et al, 2011; McPhail, 2018).

Materials and Method

This is a descriptive cross-sectional study involving 480 males who are within the age of 18 to 42 years. The males were recruited from the six states that make up South-South Geopolitical zones. A well-structured questionnaire was administered to participants. Each participant had one questionnaire to fill appropriately and independently after a well informed consent was granted. The study lasted for a period of 3 months (March to May, 2023). Statistical analysis of data was done using SPSS Version 25 and P value < 0.05 was considered significant for data.

Exclusion criteria

Any man who was below 18 years and above 47 years was excluded from the study.

Inclusion criteria

Any man between 18 to 47 years and interest in reproductive activity irrespective of their marital status were included in the study.

Results

Table 1: Age of Participants

Variable	Categories	Frequency (%)
Age	18-22 years	20(4.17)
	23-37 years	10(2.08)
	28-32 years	90(18.75)
	33-37 years	230(47.92)
	38-42 years	70(14.58)
	43-47 years	60(12.50)
Total		480(100.0%)

Table 2: Alcohol Consumption

Variable	Categories	Frequency (%)
Took Alcohol	Yes	300(62.50)
No alcohol	No	180(37.50)
Total		480(100.0%)

Table 3: Educational Status

Variables	Categories	Frequency (%)
Education	Primary	70(14.6%)
	Secondary	130(27.08)
	Tertiary	280(58.33)
	Total	480(100%)

Table 4: Marital Status

Variables	Categories	Frequency(%)
Marital Status	Married	180(37.50)
	Single	240(50.00)
	Divorced	60(12.50)
	Total	480(100.0%)

Table 5: Erection

Variable	Categories	Frequency (%)
Participants who have weak erection	(Yes)	400(83.33)
Participants who do not have weak erection	(No)	80(16.67)
Total		480(100.00)

Discussion

Weak erection is interchangeably referring to as erectile dysfunction (ED) and is a common and serious health issue among men across the globe. The continual inability to achieve and sustain erection enough to allow full and excitable sexual intercourse is known as Erectile dysfunction (ED). Weak erection could shorten the life span of a man through psychological issues that may be arise from this condition. A man with weak erection is devastating and could not comport itself. Weak erection is a global issue that it could send someone to early grave. In Africa, a man is not complete until it has erection. Several men have carried out suicide due to weak erection. Erection is life and it bring joy and happiness among men.

The study revealed that majority (47.92%) of the participants are between 33-37 years of age and this is in consonant with previous study by Nguyen, et al, (2017) who revealed that erectile dysfunction is high even under the age of 40. This implies that young active men are been cut off early from having sexual activity. This is a serious health issue that can lead to psychological problems such as drug abuse, isolation, depression and suicide. The study also revealed that most (58.3%) of the participants had tertiary level of education which shows that, they are highly educated and well experienced to know when they are not active. About 50.0% of the participants were single and because they were single, they will be prone to several ladies without restriction thus, they must be active. This shows that erectile dysfunction is on the increase among men that are single and this could be due to several factors such as stress, depression, loss of loved once, chronic alcohol consumption, hypertension and failure to achieved expectations. The study also revealed that majority of the participants were civil servants and this could be due to the facts that most of the participants had tertiary level of education. Again, being civil servant means that they are working class that alone would have expose them to

women but because their phallus is not functioning as expected they may be shy away from ladies and this may force them to pass through psychological trauma.

Un-sustained erection (erectile dysfunction) is on the increase across the globe and certain risk factors may induce this weak erection. The study revealed that majority of the participants depends on drugs. Certain drugs are risk factors in developing weak erection. It is noted that most of the young men depends on drugs on daily basis to carry out their daily activity. Certain drugs that could be responsible in blocking dopamine or the hormone called testosterone could reduce libido. Testosterone is a steroid hormone produced by the testes and is responsible in producing sex-drive in male.

The study revealed that majority (83.3%) of the participants have weak erection or erectile dysfunction (ED). This shows that weak erection is on the increase among men who are still sexually active. The demography of the study shows that the participants are young and are between 33 to 37 years of age. This actually shows that something is actually going wrong and if not corrected might cause decrease in the population size. Most of these young men who are facing erectile dysfunction are passing through psychological trauma and are not always in good mood. Some them isolate themselves, some are depressed. The research also revealed that most of the respondents who have erectile dysfunction shy away, each time they see a girl or lady of their choice. As result of weak erection they are not comfortable anywhere they see a girl and they cannot approach any girl of their choice. The study also identifies several risk factors that could cause erectile dysfunction. The research shows that 62.50% of the participants consumed alcohol over a long period and some of the participants revealed that before they have sex, they take alcohol to gain more energy and to sustain their penile erection. Other participants said they took alcohol to give the aphrodisiac effects. Aphrodisiac is substance use by male or female before sexual activity to improve and sustain erection or increase libido. However, 62.50% of the participants depends aphrodisiac substance as a preparatory activity before they begin their sexual activity or intercourse. This aphrodisiac substance could be food, drinks, drugs or plant parts use by the participants to bring them up to the task and to prove that they are strong and ready to carry out the sexual intercourse over a long period without their penis go into resolution. Most of these participants do not know the bioactive substances in this aphrodisiac substance which could deplete nitric oxide produced by nerve and function to allow blood flow into the penis and cause erection. Some of the participants have used this substance for a long time and this addiction have made them to have weak erection. The study revealed other risk factors that could be responsible for increase in the percentage of participants experiencing weak erection in the South-South, Nigeria include: 62.50% of the relied on drugs, 85.20% are hypertensive, 79.17% of diabetic and 83.33% of them took herbs each time they need sexual intercourse. This aphrodisiac substance that the participants depends on each time they want sex could be responsible for the abuse of women during sex because it may interfere with the brain system.

Conclusion

The continual inability to achieve and sustain erection enough to allow full and excitable sexual intercourse is known as Erectile dysfunction (ED). Weak erection could shorten the life span of a man through psychological issues that may be arise from this condition. A man with weak erection is devastating and could not comport itself. Weak erection is a global issue that it could send someone to early grave. The study revealed majority of the participants have weak erection or erectile dysfunction (ED). This shows that weak erection is on the increase among men who are still sexually active. The demography of the study shows that the participants are young and are between 33 to 37. The study also identifies several risk factors that could cause erectile dysfunction and these include: drugs,

hypertension, diabetes mellitus, and herbs. They took these substances each time they need sexual intercourse. This aphrodisiac substance that the participants depends on each time they want sex could be responsible for the abuse of women during sex because it may interfere with the brain system.

Acknowledgments

We acknowledge Nazor Barinua-Gbaranor, Nuazor V. Barinua-Gbaranor, Kedumle S. Barinua-Gbaranor and Tuamene E. Barinua for the joy and support, understanding encouragement during this period of research.

Funding: No funding source

Conflict of interest: None declared

Ethical approval: Not require

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