

Orgasm and Homoeopathy

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Definition

Orgasm is the sudden discharge of accumulated sexual tension during the sexual response cycle, resulting in rhythmic muscular contractions in the pelvic region along with increased heart rate, blood pressure, and respiration rate and depth with feeling of pleasure and relaxation.

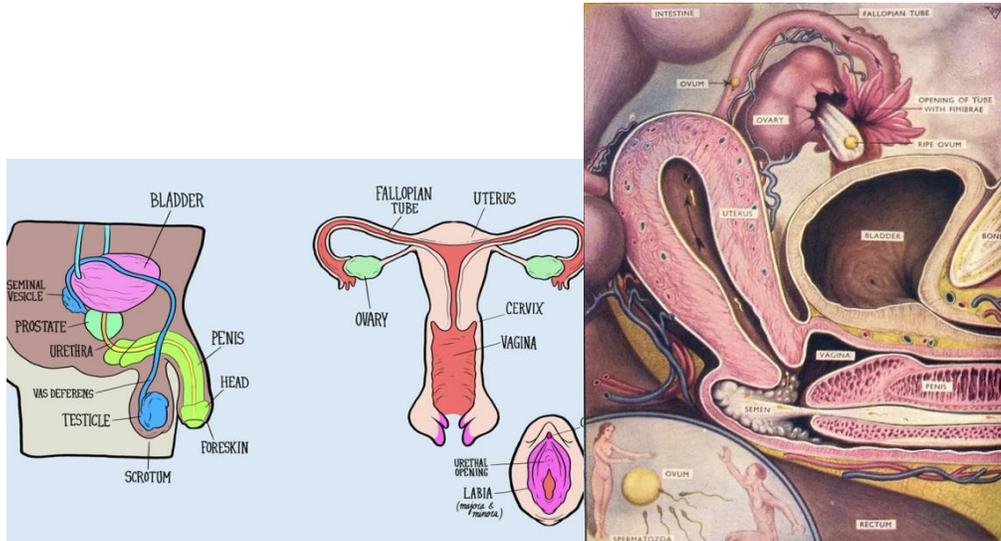
Orgasm is necessary for both male and female. It gives the life a feeling of completeness while in contrary, if suppressed or incomplete, it may lead to several mental and physical disorders.

Anatomy of orgasm

In a complete orgasm, normally developed, adult male and female reproductive organs are involved. Male and female organs are homologously same and derived from the same embryonic dermal layers.

- A. Male sex organs involve-
 1. External genital organs
 - I. Penis
 - Foreskin
 - Frenulum of penis
 - Glans penis
 - II. Scrotum
 - testicles
 2. Internal genital organs
 - I. Epididymis
 - II. Vas deferens
 3. Accessory glands
 - I. Seminal vesicles
 - II. Prostate gland
 - III. Bulbourethral glands
- B. Female sex organs involve-
 1. External genital organs
 - I. Clitoris
 - Clitoral frenulum
 - Clitoral glans (glans clitoridis)
 - Clitoral hood
 - II. Mons pubis
 - III. Pudendal cleft
 - IV. Labia majora
 - V. Labia minora
 - Frenulum of labia minora
 - VI. Vulva
 2. Internal genital organs
 - I. Vagina
 - II. Cervix
 - III. Uterus
 - IV. Fallopian tubes

- V. Ovaries
- 3. Accessory glands
 - I. Bartholin's glands
 - II. Skene's glands
 - III. Breasts



Anatomy of Male & Female reproductive organs Anatomy of Sexual Intercourse

Physiology of orgasm

Orgasm needs a complex of events to occur, including physical, psychological and mechanical ones in synchronization. There is a cycle beginning with excitement as blood rushes into the genitals, then reaches a plateau during which they are fully aroused, which leads to orgasm, and finally resolution, in which the blood leaves the genitals. During sexual arousal, androgens in males and estrogen in females act primarily. They are secreted by corresponding glands in abundance and get company of oxytocin and dopamine. Dopamine arouses as well as increases the passion and prepares the sex organs for sexual act. An increased infusion of the oxytocin during ejaculation is primarily responsible for the refractory period, and the amount by which oxytocin is increased may affect the length of each refractory period. Lack or absence of a refractory period in men may be due to increased infusion of the oxytocin. Another chemical responsible for the refractory period is prolactin, which represses the dopamine and thus finishes its action, satisfying the sex desire and feeling of pleasure, calmness and relaxation. This whole sexual act has five phases.

Excitement

It consists of caressing and foreplay stimulating the sexual brain centers. In females, the nipples become erect by dorsal sexual nerves D4, D5, and D6. Lumbar sexual nerves L1, L2, and L3 lubricate and engorges the vagina. Clitoris become erect the vaginal lips retract to widen the vaginal entrance. In the male, the sympathetic system makes the heart beats faster, increases the breathing rate and the pupils open slightly with contraction of the scrotum.

Plateau

In this phase more caressing is needed to reach the peak of excitement. The peak is higher in women. This is under control of para sympathetic sacral sexual nerves S2, S3, and S4. The woman has a longer lasting plateau than man.

Peak

This is the orgasm itself and the excitement reaches its highest intensity radiating from the genitals to the sexual centers, contracting every muscle from the head to the tips of the toes.

Descent

This is the stage of slowly coming down from sexual excitement with sense of pleasure and ease. This is slower in women because the women climb higher peaks.

Satisfaction

In this phase the woman wishes to prolong a quiet, still embrace or amplexus and may even fall asleep for a few moments. In contrast, males feel free to resume their works.

Male orgasm

In male, orgasm is achieved by physical sexual stimulation of the penis. During commencement of orgasm, accessory organs contract and the male can feel the ejaculation coming, two to three seconds prior to the real ejaculation, which the male cannot constrain, delay, or in any way control. Then after a refractory period starts. Male feels pleasurable contractions during ejaculation. The greater is the pleasure with the greater volume of ejaculate. Unlike females, for the man resolution phase includes a superimposed refractory period.

As a man nears orgasm during stimulation of the penis, he feels an intense and highly pleasurable pulsating sensation of neuromuscular euphoria. These pulses consist of a series of throbbing sensations of the bulbospongiosus muscles that begin in the anal sphincter and travel to the tip of the penis. They eventually increase in speed and intensity as the orgasm approaches until a final plateau. The pleasure sustains for 10- 30 seconds.

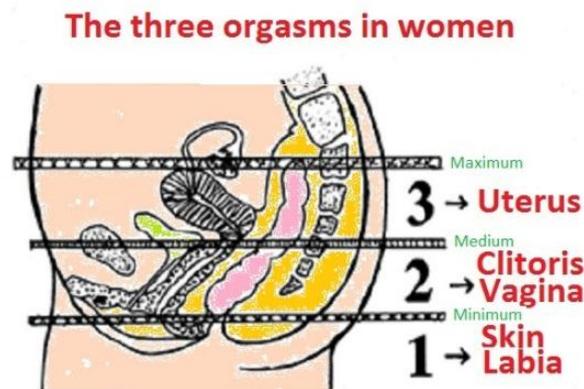
Now the sperm are transmitted up the vas deferens from the testicles, into the prostate gland as well as through the seminal vesicles to produce semen. The prostate secretes components of ejaculate. Ejaculation may continue for a few seconds after the euphoric sensation gradually tapers off. After ejaculation, a refractory period usually occurs, during which a man cannot achieve another orgasm. This can last indefinitely from a few seconds to several hours or days, depending on age and other individual factors.

Female orgasm

Women's orgasms last long, approximately 20 seconds. Orgasm in females consists of a series of muscular contractions in the pelvic area including vagina, uterus, and anus with feeling of extreme pleasure. Sometimes, these contractions are followed by extra contractions or shudders at irregular intervals. In some orgasms, no pelvic contractions are measured at all. Orgasm is preceded by erection of the clitoris and moistening of the opening of the vagina. Some women show a sex flush, a reddening of the skin over much of the body due to increased blood flow to the skin. Near orgasm, the clitoral glans retracts under the clitoral hood, and the labia minora become darker. As orgasm becomes coming up, the outer third of

the vagina tightens and narrows, while overall the vagina lengthens and dilates and also becomes congested. The myofibroblasts of the nipple-areolar complex contract, causing erection of the nipples and contraction of the areolar diameter, reaching their maximum at the start of orgasm.

All women are probably multiple orgasmic, but multiple orgasmic men are rare. The female is capable of rapid return to orgasm immediately after an orgasm, if re-stimulated before tensions have dropped below plateau phase response levels. After the initial orgasm, subsequent orgasms for women may be stronger or more pleasurable as the stimulation accumulates. At the moment of orgasm, women do not have any emotional feelings. While a man has only one orgasm, a woman can reach three peaks or climaxes-



1- Clitoral orgasm

In women, the most common way is clitoral stimulation. However, indirect clitoral stimulation as in vaginal penetration may also be sufficient. The clitoris is homologous to the penis, it is the equivalent in its capacity to receive sexual stimulation as it has more than 8000 sensory nerve endings like penis.

The Paccini's bodies in the clitoris, highly pressure-sensitive, give the woman the unique pleasurable pain due to the hydraulic pressure caused by penis's back and forth movement.

2- Vaginal orgasm

In the anterior vaginal wall as well as between top junction of the labia minora and urethra, there are sensitive areas, called as the G-spots which may produce an orgasm. G-spots are also found in urethral sponge running along the roof of the vagina. The greatest concentration of vaginal nerve endings are at the lower third i.e. near the entrance of the vagina.

The vaginal orgasm begins with the rhythmic contractions of the lower third of the vagina and combines with the sensitivity of clitoris resulting in a sense of great pleasure radiating throughout the entire body, in an intense contraction of all muscles, to the point that the toes curl.

3- Uterine orgasm

To achieve uterine orgasm, the woman must squat on top of the man so that she could move freely, rubbing the clitoris, vagina and uterus, together, against the penis, producing the maximum intensity of friction possible. The produced sensation radiates to all the muscles of the pelvic and abdominal regions, resulting in strong contractions throughout the entire body with flushing of chest and the neck. In the uterine orgasm the woman has the maximum pleasure. This orgasm lasts only 5 to 10 seconds. If it lasted longer it would endanger the woman's life.

Pathology of orgasm

There are certain dysfunctions and dissatisfactions with orgasms. Orgasmic dysfunction is a condition in which the individual has difficulty reaching orgasm, even with proper stimulation. This is mainly seen in women. For men, the disorder might present itself as an inability to reach orgasm during sexual intercourse or as ejaculation only after prolonged intense non-intercourse stimulation.

When sex is not enjoyable, it can become a chore instead of a satisfying, intimate experience for both partners. In course, sexual desire often declines, and sex occurs less often. This can create resentment and conflict in the relationship. Sexual response involves the mind and body working together in a complex way. Both need to function well for appearance of an orgasm. Many factors can result in orgasmic dysfunction-

- A history of sexual abuse or rape
- Boredom in sexual action
- Certain drugs, especially antidepressants
- Hormonal disorders- menopause, chronic illnesses affecting health and sexual concern
- Fatigue and stress
- Negative attitudes toward sex
- Shyness or embarrassment about asking for the type of stimulation needed as per person or situation
- Diseases causing chronic pelvic pain
- Medical conditions affecting nerve supply to the pelvis, such as multiple sclerosis, diabetic neuropathy, and spinal cord injury

Types of orgasm

There are certain conditions, according to which we can categorize orgasm into-

Anorgasmia

The failure to have orgasm or difficulty reaching orgasm after abundant sexual stimulation is called anorgasmia or inorgasmia. It may be of four types-

1. Primary anorgasmia

Individual never experienced an orgasm.

2. Secondary anorgasmia

Individual experiences difficulty reaching orgasm, in spite of experienced them before.

3. Situational anorgasmia

This is the most common type of orgasmic dysfunction. It is when a one can only orgasm during specific situations, such as oral sex or masturbation.

4. General anorgasmia

The inability to achieve orgasm under any circumstances.

Anhedonia

It is a condition in which an individual cannot feel pleasure from an orgasm. If a male experiences erection and ejaculation but no orgasm, he is said to have sexual or ejaculatory anhedonia.

Dry orgasm

Sometimes, men may have orgasm without ejaculation. A dry orgasm is the condition to ejaculate without reaching orgasm. It may be due to delayed ejaculation, nocturnal emission or a case of anorgasmic ejaculation. Males with dry orgasms can frequently produce multiple orgasms, as the refractory period is reduced.

Prostatic orgasm

Men may also achieve orgasm by stimulation of the prostate.

Nipple orgasm

Many women, during breast feeding, experience an orgasm.

Role of orgasm

A complete orgasm leaves the person with a pleasant, light, cheerful, relaxed, calm and well satisfied state, hereby called as pleasure syndrome. Incomplete orgasm may lead to a number of disorders and a panic state as well as anxiety contributing to several psychological and physical disorders, hereby called as anxiety syndrome. The following table shows physiology of complete and incomplete orgasms, leading to pleasure syndrome and anxiety syndrome-

System affected	Pleasure syndrome	Anxiety syndrome
Peripheral vessels	Dilated	Contracted
Cardiac action	Slowed down	Accelerated
Blood pressure	Decreased	Increased
Pupils	Constricted	Dilated
Secretion of saliva	Increased	Decreased
Musculature	State of tonus, relaxed	Paralyzed or in spasm

Orgasm and Homoeopathy

In homoeopathy, the mode of treatment is holistic. The patient is considered as a sick individual. Orgasmic dysfunctions are specific to the personality of the individuals. Therefore, homoeopathy becomes the best suitable option for treatment of orgasm related disorders. The following are some most common and important remedies for orgasmic disorders-

Orgasm in General alum. am-c. am-m. Aml-ns. androc. ang. ARG-N. ARS. aur. bamb-a. bell. BERB. Brom. calad. CALC. cann-i. cath-a. caust. eug. ferr. Gels. Glon. graph. Ign. kola kreos. lac-c. lac-e. LACH. Lil-t. lyc. MELI. merl. musca-d. nat-m. Nux-v. olib-sac. Op. ORIG. Phos. plac. PLAT. pneu. positr. rhod. Sang. sel. SEP. spong. STANN. staph. stront-c. stroph-h. sul-ac. sulph. syph. tritic-vg. urol-h.

Short Repertory of Orgasm

DREAMS - AMOROUS - orgasm; with bamb-a. nux-v.
DREAMS - LASCIVIOUS - orgasm; with musca-d.
DREAMS - LEWD - orgasm; with musca-d.

FEMALE - COITION - aversion to - orgasms, painful, from nat-m.
 FEMALE - ORGASM – delayed **BERB. brom.**
 FEMALE - ORGASM - dreams, in amorous bamb-a.
 FEMALE - ORGASM – easy **STANN.**
 FEMALE - ORGASM - involuntary - dreams, in amorous bamb-a.
 FEMALE - ORGASM – involuntary ang. **ARG-N. ARS. bamb-a. CALC. LIL-T. nat-m. NUX-V. OP. PLAT. sul-ac.**
 FEMALE - ORGASM - night - waking, on urol-h.
 FEMALE - ORGASM – night **arg-n.**
 FEMALE - ORGASM – night **arg-n. urol-h.**
 FEMALE - ORGASM – painful **nat-m.**
 FEMALE - ORGASM - waking, on cath-a.
 FEMALE - ORGASM – wanting **BROM. calad. kola**
 FEMALE - PAIN - cutting - ovaries - coition, during, at moment of orgasm **syph.**
 FEMALE - PAIN - ovaries - coition - during - orgasm, during **syph.**
 Female - SEX, female - aversion, to sex - orgasms, painful, from **nat-m. staph.**
 Female - SEX, female - orgasms, general - delayed - delayed and painful **ign. nat-m. staph.**
 Female - SEX, female - orgasms, general – delayed **Berb. brom. caust. Nat-m. SEP.**
 Female - SEX, female - orgasms, general - dreams, in amorous bamb-a.
 Female - SEX, female - orgasms, general – easy **Plat. Stann.**
 Female - SEX, female - orgasms, general - involuntary with violent desire ang. **Arg-n. Ars. Calc. Lil-t. nat-m. Nux-v. Op. PLAT. sul-ac.**
 Female - SEX, female - orgasms, general – night **arg-n.**
 Female - SEX, female - orgasms, general – painful **nat-m. plat. staph.**
 Female - SEX, female - orgasms, general – wanting **Brom. calad. Nat-m. SEP.**
 Female - SEX, female - violent, desire - involuntary, orgasms, with ang. **Arg-n. Ars. Calc. Lil-t. nat-m. Nux-v. Op. ORIG. PLAT. sul-ac.**
 Female - SEX, female - voluptuous, sensation, tingling, coitus-like - orgasm, with **plat. sul-ac.**
 FEMALE - TINGLING, prickling, voluptuous - orgasm, with **sul-ac.**
 Female - TINGLING, sensation, voluptuous, genitalia - orgasm, with **sul-ac.**
 FEMALE - TINGLING, voluptuous - orgasm, with **sul-ac.**
 FEMALE GENITALIA - COITION, - orgasm – delayed **Berb. brom.**
 FEMALE GENITALIA - COITION, - orgasm – easy **stann.**
 FEMALE GENITALIA - COITION, - orgasm – painful **nat-m.**
 FEMALE GENITALIA - COITION, - orgasm – wanting **Brom. calad.**
 FEMALE GENITALIA - DESIRE - violent - involuntary orgasms,with ang. **Arg-n. Ars. Calc. Lil-t. nat-m. Nux-v. Op. PLAT. sul-ac.**
 FEMALE GENITALIA/SEX - ORGASM – delayed **alum. Berb. brom. lac-e.**
 FEMALE GENITALIA/SEX - ORGASM – easy **olib-sac. Plat. positr. Stann.**
 FEMALE GENITALIA/SEX - ORGASM – involuntary ang. **Arg-n. Ars. Calc. Lil-t. nat-m. Nux-v. Op. PLAT. sul-ac.**
 FEMALE GENITALIA/SEX - ORGASM – night **arg-n. nux-v. urol-h.**
 FEMALE GENITALIA/SEX - ORGASM – painful **nat-m.**
 FEMALE GENITALIA/SEX - ORGASM – wanting **Brom. calad. kola pneu. tritic-vg.**
 FEMALE GENITALIA/SEX - ORGASM - waves; in **plac.**
 FEMALE GENITALIA/SEX - TINGLING, voluptuous - orgasm; with **sul-ac.**
 Females - orgasm - delayed, wanting **berb. brom.**
 Females - orgasm – easy **stann.**
 GENERALITIES - ORGASM of blood - coition, after **am-c. Sep.**
 Hysteria - sexual - orgasm, at the height of **lac-c.**

Male - EJACULATION, general - failing, during sex - though the orgasm is present [cann-i. graph.](#)

Male - EJACULATION, general - late, too - orgasm subsides several times before it leads to ejaculation [eug.](#)

Male - EJACULATION, general - late, too - orgasm subsides several times before it leads to ejaculation - some time after the orgasm [calc.](#)

Male - EJACULATION, general - late, too - some time after the orgasm [calc.](#)

MALE - EJACULATIONS, seminal discharge - failing during coition - orgasm is present, although [cann-i. graph.](#)

MALE - EJACULATIONS, seminal discharge - late, too - orgasm subsides several times before it leads to ejaculation [eug.](#)

MALE - EJACULATIONS, seminal discharge - late, too - some time after the orgasm [calc.](#)

MALE - THRILL, orgasm – diminished [FERR.](#)

MALE - THRILL, orgasm – intense [androc.](#)

MALE - THRILL, orgasm – prolonged [cann-i.](#)

MALE AND FEMALE GENITALIA/SEX - ORGASM – easy [stann.](#)

MALE GENITALIA - SEMINAL discharge, - failing during coition - though the orgasm is present [cann-i. graph.](#)

MALE GENITALIA - SEMINAL discharge, - late, too - some time after the orgasm [calc.](#)

MALE GENITALIA - SEMINAL discharge, - late, too - the orgasm subsides several times before it leads to ejaculation [eug.](#)

MALE GENITALIA/SEX - EJACULATION - failing during coition - orgasm is present; though the [cann-i. graph.](#)

MALE GENITALIA/SEX - EJACULATION - late, too - orgasm - after orgasm; some time [calc.](#)

MALE GENITALIA/SEX - ORGASM – easy [Plat.](#)

MALE GENITALIA/SEX - ORGASM – wanting [calad. calc. sel.](#)

MALE SEXUAL SYSTEM - Spermatorrhoea - with - emission and orgasm absent [calad. calc. sel.](#)

MIND - DREAMS - amorous - orgasm, with [bamb-a.](#)

MIND - EXCITEMENT, excitable - tendency - orgasm of blood, with [graph.](#)

Mind - FEARS, phobias, general - orgasm, sexual, of [Plat. staph.](#)

MIND - HYSTERIA - coition - agg. at height of orgasm [lac-c.](#)

MIND - HYSTERIA - orgasm; at the height of [lac-c.](#)

Mind - HYSTERICAL, behavior - sexual, excesses, after - orgasm, at the height, of [lac-c. plat.](#)

MIND - INSANITY - orgasm, at height of [lac-c.](#)

MIND - INSANITY, madness - orgasm, at height of [lac-c.](#)

MIND - INSANITY, madness - orgasm, at height of [lac-c.](#)

MIND - IRRITABILITY - orgasm, after [ang.](#)

MIND - IRRITABILITY - sexual - excitement, from - dreams and orgasm, in a woman [NUX-V.](#)

Orgasms - sexual, easy [stann.](#)

RESPIRATION - IMPEDED, obstructed - orgasms in hypogastrium [rhod.](#)

Sexual affections, disturbances in general - orgasms easy, in women [stann.](#)

URETHRA - DISCHARGE - orgasm; during [Ign. nat-m. Phos.](#)

Waves, ebullitions, fluctuations, orgasms [am-m. Aml-ns. aur. bell. calc. ferr. Gels. Glon. kreos. LACH. lil-t. lyc. MELI. Nux-v. phos. Sang. SEP. spong. stront-c. stroph-h. sul-ac. sulph.](#)

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