

Ejaculation as a potential treatment of nasal congestion in mature males

Nasal congestion is defined by the blockage of the nasal passages usually due to membranes lining the nose becoming swollen from inflamed blood vessels [1]. This occurs when the nasal blood vessels expand in response to exercise, cold air, spicy food, even stress. Common causes of nasal congestion are common cold, influenza, Hay fever and chronic sinusitis [1–3]. It impairs the natural human drive for nasal breathing and leads to lower self-esteem and to impaired quality of life [1]. There is a host of conservative treatments, including decongestant pharmacotherapy, antiallergy measures, nasal dilation devices and several surgical procedures [1,2], but it is still a symptom that is difficult to treat.

Decongestants are the main pharmacologic agents for the treatment of nasal congestion and act by stimulating α -adrenergic sympathetic nervous system. This leads to vasoconstriction of the nasal blood vessels and subsequent alleviation of the symptoms. However, oral or topical use of decongestants can have adverse effects of sympathetic stimulation such as hypertension. Furthermore, if used for more than two or three days, they can actually make congestion worse [4,5].

Herein, the author would like to provide a new treatment strategy for the treatment of nasal congestion in mature men. It is known that sexual arousal in men is followed by penile erection and subsequent ejaculation. Ejaculation has two phases: emission and ejaculation proper. The emission phase of the ejaculatory reflex is under control of the sympathetic nervous system, while the ejaculatory phase is under control of a spinal reflex at the level of the spinal nerves S2-4 via the pudendal nerve. A refractory period succeeds the ejaculation, in which the sympathetic nervous system counteracts the effects of the parasympathetic nervous system [6,7]. As it is seen, ejaculation can be used as a potential treatment of nasal congestion because its emission phase provides a sympathetic stimulation and subsequent vasoconstriction and nasal decongestion. Also, the refractory period serves as a sympathetic reservoir and

maintains the decongestive state for a considerable while. This method does not wish to have the adverse effects of pharmaceutical decongestants because it is a physiologic stimulation of the sympathetic system in the body. According to the current idea, sexual intercourse or masturbation is proposed in the cases of nasal congestion in mature men. It can be done time-to-time to alleviate the congestion and the patient can adjust the number of intercourses or masturbations depending on the severity of the symptoms. This hypothesis suggests a unique treatment of nasal congestion because it uses a physiological mechanism of the human body for encountering the problem.

References

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