

## Do Selective serotonin re-uptake inhibitors help men with premature ejaculation?

Clinical Question	Are Selective serotonin re-uptake inhibitors (SSRIs) an effective treatment for adult men with premature ejaculation?
Bottom Line	Compared to placebo, the administration of SSRIs for premature ejaculation may improve perception of change with treatment and satisfaction with intercourse. SSRIs may also improve perceived control over ejaculation and reduce both distress about PE and relationship difficulties. These potential benefits need to be weighed up against the possible increase in adverse events with SSRIs.
Caveat	The review did not include any active comparators and, therefore, is unable to address how these drugs compare to other management approaches such as topical anaesthetics, tramadol or $\alpha$ 1-adrenoreceptor antagonists, which are recommended as treatment alternatives. A specific concern in the use of SSRI for depression is the potential risk of promoting suicidal ideation, although this remains an issue of controversy. The reported adverse events and study withdrawals of the included studies did not provide a signal for this outcome, but we also recognize that the overall number of participants and the relatively short follow-up of these studies limit the ability to identify infrequent outcomes that might be associated with long-term use.
Context	Premature ejaculation is a common problem among men that occurs when ejaculation happens sooner than a man or his partner would like during sex; it may cause unhappiness and relationship problems. SSRIs, which are most commonly used as antidepressants are being used to treat this condition.
Cochrane Systematic Review	Sathianathen NJ, Hwang EC, Mian R, Bodie JA, Soubra A, Lyon JA, Sultan S, Dahm P. Selective serotonin re-uptake inhibitors for premature ejaculation in adult men. Cochrane Database of Systematic Reviews 2021, Issue 3. Art. No.: CD012799. DOI: 10.1002/14651858.CD012799.pub2. This review contains 31 trials with a total of 8,254 participants.

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Systematic review link: https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD012799.pub2/full