

3.2.2.4.0.5 Pharmacological enhancement

Unfortunately, many more herbs have a reputation to aid in sexual function than actually have an effect. And some of the herbs that do have a clear effect, such as yohimbe, have bad side effects. Yohimbe certainly aids erections, but it's too heavy on the heart to be a comfortable choice.

Prescription drugs also have their downsides. Sure, phosphodiesterase inhibitors all work well to engineer erections. But the erections caused by each of these medications are cold. The above three do not increase sexual pleasure. Dopaminergics can increase sexual excitement, but for most of them, the window of opportunity isn't very wide, and one has to know what to expect.

Many dopaminergics, including sublingual apomorphine (Uprima) have a tendency to make you feel unwell. A slight nausea sets in when dopaminergics become effective, and one desires to lie down (even without a sexual partner at hand). For many people, including me, the slight nausea is accompanied with sleepiness. Sleepiness, of course, is, in men, often accompanied by erectile ease.

So, combining apomorphine with a phosphodiesterase inhibitor like Pfizer's Blue will certainly produce a nice erection, and sexual excitement (in spite of the accompanying nausea) if one gets the timing right. This means, one has to start to engage in sexual intercourse at the time the dopaminergic kicks in (when the slight nausea first appears). If one misses this point, and falls asleep, even just for 15 minutes, the opportunity for sexual enhancement has passed and the combination of a dopaminergic and a phosphodiesterase inhibitor is likely even worse than just taking the phosphodiesterase inhibitor alone.