

Premature Ejaculations Considerations

The ejaculatory reflex is predominantly controlled by a complex interplay between serotonergic and dopaminergic neurons. And as the study suggested authors were able to increase performance by increasing melatonin levels. Here's how they put it: **"We believe that not every case of low melatonin levels is associated with PE, but every case of PE is associated with low melatonin levels.** Since **SSRIs** are riddled with side effects and withdrawal issues, the goal is to increase serotonin, dopamine and melatonin naturally

Considerations to raise Serotonin which converts to Melatonin

5-HTP is a precursor to serotonin (cofactors needed are vitamins B6, C, Zn, Mg). Serotonin will convert to melatonin (cofactors needed are B6 and Sam E).

Considerations to raise Dopamine

Dopamine is derived from tyrosine (cofactors are iron, B6 and folate).

Consider This 60 Day Strategy:

- 1) Use the anti-inflammatory diet from the 3-Step Detox diet.
- 2) Support serotonin pathway by using 100-200 mg as **5-HTP** at night and 100 mg in the a.m.
- 3) Support the melatonin pathway with 6-12 mg melatonin as **Melatonin-B6/Mg** at bedtime. Unless you are doing hormone testing cut the dose of melatonin to 3-6 mg after 30 days.
- 4) Support the dopamine pathway with 500 mg of tyrosine as **L-Tyrosine** in the am.
- 5) Support Mitochondrial repair and assure cofactors are present by using **VasculoSirt** 5 bid for one month and then 3 bid for the second month. If cost is a factor **ProMulti-Plus** could be substituted at 2 tid.
- 6) Add enough magnesium as **Mg-Zyme** at night to have a loose but formed stool. Start with 3 at bed and add one tablet every 3 days.
- 7) Essential fatty acids to reduce systemic inflammation use 2 tid of a blend of mixed oils as in **Optimal EFAs, EFA-Sirt Supreme or SunFlax Caps.**