Stages of male sexual response [1]

Dear Alice,

Please explain the male orgasm stages.

Answer

Dear Reader,

Since you asked so politely, let’s start from the beginning. The male orgasm is just one part of the sexual response cycle for men. What you’re likely referring to is the human sexual response cycle, published in 1966 by William Masters and Virginia Johnson. Interestingly, though this model is decades old, it’s still the most commonly taught model. As you’ve mentioned in your question, it’s generally explained by the progression of four stages. However, it’s good to note that these stages vary quite a bit between individuals and their own personal experience (more about that later). Before talking more about male anatomy and physiology, let’s define a few terms of the male sexual and reproductive system first:

- **Penis.** The penis is the external sex organ of male anatomy and is where both urine and ejaculate exit the body. It has lots of nerves focused in a small surface area, making it a very sensitive body part. It is also made up of erectile tissue that allows it to grow in size and harden when stimulated.
- **Urethra.** The urethra is a tube that runs through the penis and it transports both urine from the bladder and semen from the testes from inside the body to the outside of the body.
- **Testes.** Also known as testicles, the testes are typically in pairs and are the gland in the male reproductive system responsible for semen production.
- **Scrotum.** The external pouch-like area of the body that hangs under the penis and holds the testes or testicles.

And now that you’ve got the terminology down, onto the male sexual response system:

**Stage One: Excitement**

The excitement or sexual arousal phase kicks off the male sexual response cycle. Arousal can be triggered by thoughts, images, touch, scents, or any number of stimuli. Physiological signs of
arousal can include muscle tension, increased heart rate and breathing, elevated blood pressure, flushed skin, hardened or erect nipples, and blood flow to the genitals and pelvic region. This blood flow can cause the penis to begin becoming erect and the testicles to increase in size and elevate towards the body. Distraction, anxiety, stress, depression, and lots of other factors can impact erection and arousal. People may shift between heightened or lowered excitement, depending on stimulation and level of distraction or stress. The excitement phase can last for just a few minutes or for hours, depending on the person and the circumstances.

Stage Two: Plateau

The plateau phase is somewhat of an intensified version of the excitement phase. During plateau, the penis and testes continue to increase in size due to blood flow. Heart rate, muscle tension, and some involuntary body movements or contractions are also not uncommon, especially in the feet, face, and hands. This is also the time when pre-ejaculate may become visible at the opening of the urethra. Pre-ejaculate is responsible for adjusting the pH balance of the urethra so sperm can survive during ejaculation. Semen from past ejaculations or sexually transmitted infections can also be present in pre-ejaculate. So you may want to take precautions for pregnancy prevention and reducing the risk of STI transmission.

Stage Three: Orgasm & Ejaculation

Stage three is generally when orgasm and ejaculation occur. These two events are often lumped together as one, but they are actually two separate functions of the body. Orgasm can be described as a cerebral or the brain’s response to ejaculation (regardless of whether ejaculation occurs). Orgasm is also often described at the climax or peak of the sexual response cycle. The length of orgasm can vary — for some, orgasm lasts a few seconds to a minute, while others may be able to prolong orgasm for longer. Some people may experience an internal sensation that orgasm is about to happen, described as ejaculatory inevitability. During ejaculation, semen exits the body through the urethra and rhythmic contractions may be felt at the head of the penis, in the pelvic area, and near the anus. Those contractions are responsible for propelling semen through the urethra and out of the head of the penis. The orgasmic and ejaculation phase is often noted by increased involuntary muscle movements and pelvic thrusts.

Stage Four: Resolution

Resolution is the phase when the body begins to return to an unexcited state. Blood begins to flow out of the penis, and erection begins to gradually subside. Muscles often begin to relax and skin returns to a non-flushed color. Resolution can be marked by feelings of drowsiness, as well as feelings of increased intimacy, relaxation, and contentment.

Following ejaculation and orgasm, many people experience what is known as the refractory period. The refractory period is a time when the body recalibrates, erection and subsequent orgasm are unlikely to occur again, and sexual stimulation may feel too sensitive or even painful. The length of the refractory period can vary widely person to person.

Just four steps, from start to finish, right? One issue found with the Masters and Johnson model is that it doesn’t account for those who don’t follow a linear sexual response (for example, a person may not experience these stages in order, some may experience stages simultaneously,
or due to sexual dysfunction, may not experience one or more stages). It’s good to note that not following this model doesn’t mean a person is “abnormal”. Over the years, several researchers have identified missing pieces to this model and proposed new models to help explain variance in the human sexual response. Some missing factors include how culture, relationship issues, and sexual desire factor into sexual response — none of which are physiological. So, while it’s good to have a basic understanding of how many people experience sexuality and orgasms, it may not account for everyone’s individual experience. That’s a lot for just one model!

If you’d like to learn more about sexuality and orgasms, check out the Go Ask Alice! Sexual & Reproductive Health archives.

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