

A gay men's guide to cocks and balls

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Below the Belt

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Website: www.tht.org.uk THT Direct: 0845 12 21 200

Registered office: 314-320 Gray's Inn Road, London WC1X 8DP

Tel: 020 7812 1600 Email: info@tht.org.uk

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Fourth edition

Here it is – all you'll ever need to know about cocks and balls

Get to grips with pricks,
discover the delights of dicks
and learn ways to keep your
'pecker' up.

Package Tour

A journey round your cock and balls.

The outside view

Foreskin

Up to 15 square inches of sensitive skin with the inside skin being an absorbent mucous membrane.

Glans

(Latin for 'acorn') - the cock's head. Goes bigger and redder/more purple as it fills with blood when you're turned on.

Meatus

Opening ('slit') of the urethra (the 'piss pipe').

Scrotum

The ball sack.

Corona

(Latin for 'crown') - sensitive edge around the bottom of the glans.

Frenum (aka Frenulum)

Sensitive membrane connecting foreskin to the cock's head - stops foreskin retracting too far back and pulls it forward again after a hard-on.

Perineum

Fold of skin stretching from the ball sack to the arse hole (supersensitive for some).

Inside view

Corpora cavernosa

Spongy tissue that fills with blood to give a hard-on.

Cowper's gland

Produces pre-cum to make urethra less acidic for sperm.

Epididymis

The bumpy soft tube on the back of your ball - a mass of tubes where sperm matures.

Prostate gland

Produces fluid that makes up cum (semen). Gives pleasure when touched.

Seminal vesicle

Gland that makes fluid for cum that protects sperm. This fluid is rich in sugar to feed sperm.

Testicle

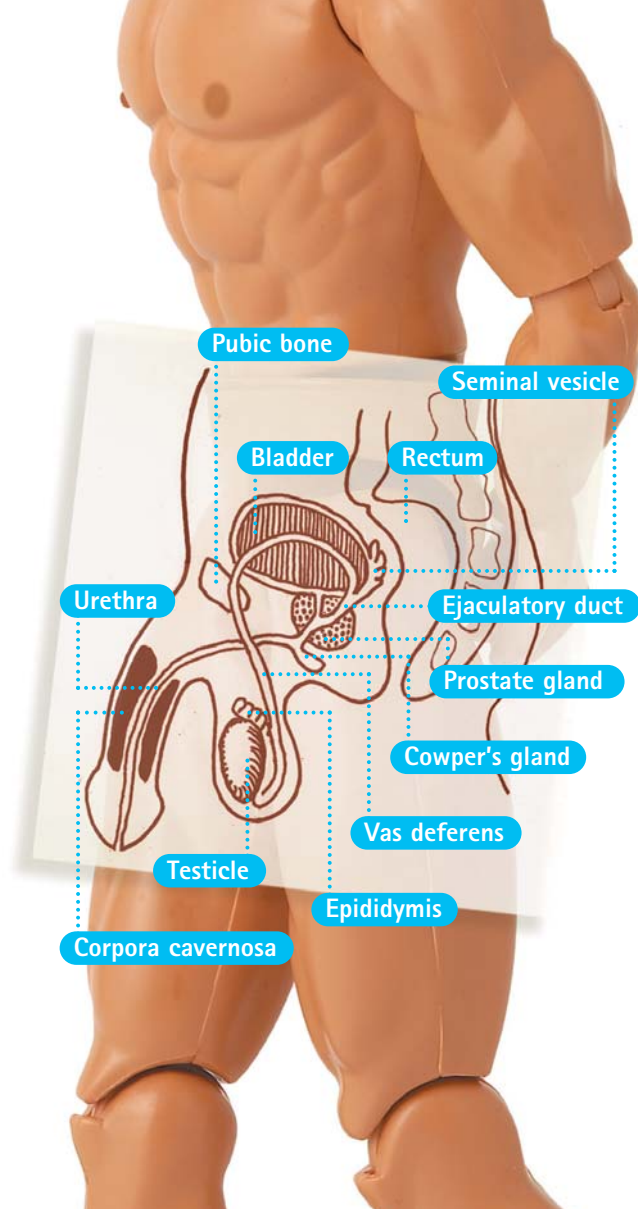
The ball, where sperm and the male hormone testosterone are made.

Urethra

Tube inside dick ('piss-pipe') carrying cum and piss out of the body (lined with absorbent mucous membrane).

Vas deferens

Narrow tubes leading from epididymis. Cutting them is a 'vasectomy', after which a man's cum contains no sperm, so he can't father children.



Hard facts

Your 'boner's' got no bone and your 'love muscle's' no muscle. So how does it get rock hard? When you're turned on signals go to the brain which trigger extra blood flow to your cock. The spongy material of the corpora cavernosa floods with blood, swelling the dick. This presses against veins that normally carry blood out of the cock, stopping more blood escaping, causing the erection to reach its greatest height. Meanwhile, the Cowper's gland has been producing pre-cum to make the urethra less acidic for sperm. After ejaculation or when the stimulus stops the brain sends signals to slow the blood flow. This eases pressure on the veins inside your dick, allowing blood to leave the cock once more - so you go soft again.

"Say cheese!"

Smegma's a creamy, cheese-like substance secreted by glands either side of the frenum to lubricate the cock's head. It builds up under the foreskin unless it's regularly washed. It's not harmful - in fact it has anti-viral/anti-bacterial properties. It's a myth that smegma can cause cancer - studies have shown there's nothing cancer-causing in it. Circumcised men don't produce smegma.



How HIV gets into a cock

Although it's fairly tough, the skin of the cock can tear and it can absorb liquid such as blood. This is how HIV can get into the body through the cock ...

Through the foreskin and urethra:

Imagine an HIV negative man fucks a man with HIV without a condom. His cock can come into contact with blood because arses often bleed a little when fucked. There can also be contact with anal mucus covering the inside of the arse. HIV in blood and mucus can infect the HIV negative man by passing through mucous membranes in his urethra (piss pipe) and foreskin. Mucous membranes are delicate moist areas of skin with lots of blood vessels.

Through the cock's head and shaft:

During sex, friction on the shaft of the cock head can leave cuts or rubbed skin (often too small to even see). HIV infected blood can get through this damaged skin. Getting HIV infected cum on the cock is risky too, so it's better not to lube up a cock with another man's cum.

Rougher = riskier:

- The longer and rougher the unprotected fuck, the greater the risk (more friction = more damaged skin on the cock letting blood with HIV in it get into the body).
- Using lube reduces friction.

Longer = less safe:

- Sticking an uncovered cock up the arse for a short time can be less risky than doing it for a long time.
- But even a second or two inside risks contact with HIV infected blood or some other sexually transmitted infection.
- It's worth remembering, the easiest way for HIV to be passed on is when an HIV negative man gets fucked without a condom by a man with HIV (especially if he cums inside the negative guy's arse).
- The most effective way of reducing risk is covering the dick with a condom.

Boys in the hood

The foreskin is made up of up to 15 square inches of skin and acts like the eyelid does for the eye:

- **Keeping the cock's head lubricated and sensitive (for enhanced sexual pleasure in the head).**
- **Protecting the cock's head from infection and damage.**
- **Giving more pleasure during sex thanks to all the nerve endings in the foreskin.**

The inside layer of the foreskin is a 'mucous membrane' meaning it's absorbent and can easily get small tears in it (maybe too small to even see).

A cut above the rest?

Circumcision is when the foreskin is cut off, usually done when a boy is a baby, especially for religious reasons eg. among Jews and Muslims. The 2001 National Gay Men's Sex survey found 1 in 5 gay men in the UK were circumcised ('cut') - higher if a man's older, living in London, or Black or Asian. American boys have traditionally been circumcised though these days only about 6 out of 10 are, even fewer on the West Coast. The last 20 years have also seen circumcision rates in Australia fall.

Although someone circumcised at birth won't know any different, circumcision leads to some loss of feeling due to losing nerve endings in the foreskin and frenum and the fact that without a foreskin protecting it, the cock's head toughens up, becoming less sensitive. It's a myth that circumcision is more hygienic. Hygiene's no problem so long as men wash underneath their foreskins. There may be a slight increase in cervical cancer rates of women with uncircumcised male partners.

Cancer of the penis is a bit more common in men with foreskins but this cancer is extremely rare. Research from various countries suggests being circumcised offers some (but not complete) protection against sexually transmitted infections, including HIV. It seems infections can enter the body through the inside of the foreskin. This research hasn't focused on gay men. There's no evidence being 'cut' makes gay men less likely to get HIV, for example. The 20001 Gay Men's Sex Survey of 10,000 UK gay men showed no difference in HIV rates between 'cut' and 'uncut' men. And for gay men (unlike straight men) it's through their arse that infections with STIs and HIV often happen. Foreskin or not, any HIV negative man risks getting HIV if he doesn't use a condom. And all 'cut' men are advised to use condoms as strongly as 'uncut' men if they want to stop themselves or others becoming HIV positive.

Have you got 'acuculophilia'? It's 'an attraction to circumcised men'.

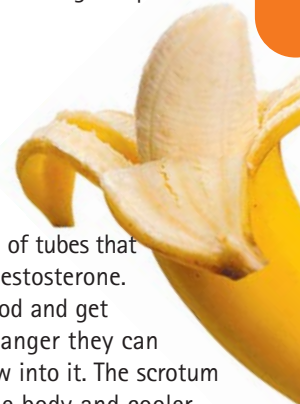
See p16 and p35 for more on foreskins, from tight ones to growing a new one.

Talking bollocks

Testicles or 'balls' are egg-shaped masses of tubes that produce sperm and the male hormone testosterone. When you're turned on they fill with blood and get bigger. When you're aroused or sense danger they can move towards the body or even withdraw into it. The scrotum or 'ball sack' keeps the balls outside the body and cooler (around 34°C, a couple of degrees cooler than body temperature and better for making sperm). Frequent hot baths or tight underwear can reduce sperm production.

> DID YOU KNOW ?

Each testicle produces about 150 million sperm every 24 hours!



Clever Dick

Size and shape -
the long and the short of it



When it comes to penises, what's 'normal' covers a fairly large range of size and shapes. While it's usual for men to wonder how theirs compares with other men's, few men have dicks outside what is considered 'normal'.

Men who are very self-conscious about their dicks, especially size, may be unhappy about other things about themselves, but the focus of their unhappiness becomes their cock. They believe life would be so much better if only their cock was a different shape, when really anxiety about their cock could be covering other insecurities. The dick is one of the parts of the body that's very hard to change surgically and get good results. It's far easier to become a better lover by improving your sexual technique. Talking through worries about cock size with a sexual counsellor can be very useful.

Measuring up

Earlier surveys overestimated cock size because they relied on men measuring their own dicks. The most reliable survey had nurses measuring the erections and the average erect dick turns out to be 5.9 inches (15cm). Two thirds of men have a cock that's between 5.1 and 6.2 inches when hard (13-16cm). The average girth (the measurement around the thickest part of the shaft when erect) is just under 5 inches (13cm), with three quarters of men measuring between 4.5 and 5.5 inches (11.5-14cm)*. So nearly 90% of men are within an inch or two of each other when hard.

*source: 2001 Lifestyle Condom Co. survey of 300 US men

How to measure a cock

Place a ruler at the base where the pubes are and measure to the tip of the erection. For the girth, measure the length of string needed to go round the thickest part of the erect shaft.

Most erect dicks curve one way or another. Only if the bend is severe or causing pain is there a need to do anything about it.

So guys, what do you have to say about dick size?



**"As I see it,
the BIGGER
the BETTER!!"**



**"It's more about
what's between
your ears than
what's between
your legs"**



**"Measure the
pleasure not
the meat"**



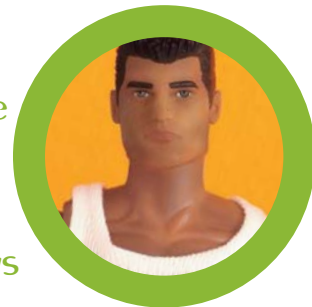
**"I admit it,
I'm a size
queen"**



**"No surgery will
make you
a better lover!"**



**"Great lovers have
big imaginations,
not big dicks"**



**"You're a whole
person - it's the
total package,
not the packet
in your pants,
that draws
people to you"**

But are there any ways to get a bigger cock?

Vacuum pumps

Used to firm up a hard-on they can make a stiffie look bigger for a short time (see p30 for more details).

Fat injections

Fat taken from the belly or thigh can be injected into the shaft to make it look thicker. But over time more injections will be needed and the fat can move around creating a lumpy and uneven look.

Surgery

The Bihari procedure involves cutting the ligaments that anchor the cock to the pubic bone, freeing a few inches of cock normally hidden inside the body. This is followed by months of wearing weights from the cock for 20 minutes a day to stretch it. At most you can gain 2 inches (5cm) when soft (less when erect) but the erection will not point as high as before surgery.

Grafting fat onto the shaft is a variation of the above operation, but this involves being circumcised at the same time.

A word of warning: after these procedures many men find they're less happy with the look of their cock than before surgery and enjoy less sexual satisfaction.

> DID YOU KNOW ?

Condoms more easily come off if they're not the right size for a dick - look out for 'snug fit' on the condom pack, recommended for men with smaller penises. Extra large condoms exist for men with bigger dicks (eg. Trojan Magnum XL, or Condomi XXL condoms). And some use a Femidom (polyurethane female condom) as an extra big, baggy condom (you take the inner ring out).



Grow your own foreskin?

Some circumcised men are unhappy about being 'cut' and have experimented with replacing what they've lost. 'Foreskin restoration' is possible but it can take several years to get the full effect and should be done in consultation with a doctor. The new 'foreskin' won't have the nerve endings a natural foreskin has and won't 'hug' the penis head - it'll be a looser 'fit'. This web site has men discussing their attempts to grow a foreskin - including photos.

<http://net.indra.com/~shredder/restore/>

> DID YOU KNOW ?

For most men the left ball hangs a little lower so that the balls don't knock together when we walk. And just one ball makes enough cum and male hormone to meet a man's needs.

Piercing

More and more people are getting their cocks and balls pierced because they like the look and the 'feel' during sex.

The *2002 Gay Men's Sex Survey* found that this many men had piercings in the:

3% **Cock head**

Ampallang / Apadravya / Prince Albert

1% **Perineum**

Guiche

1% **Other**

Foreskin / shaft / scrotum

Figures rounded up/down to nearest percentage point.

All piercings can bleed heavily for several days and take several weeks to heal (more specialist ones can take longer). Piss is nearly sterile so shouldn't infect the wound. Wearing loose underwear is better.

Avoid sucking a pierced dick while the hole is fresh to avoid infections passing to him or you (mouths are full of bacteria).

The Prince Albert



The ring goes in through the urethra and out through a hole pierced in or just to the side of the frenulum. It heals within weeks, sometimes months.

It's widely believed the 'Prince Albert' penis piercing gets its name from the husband of Queen Victoria.

Prince Albert supposedly had a ring pierced through his cock ca.1825 so that he could fasten down his dick on to his inner thigh, possibly by attaching the ring to a hook sewn inside his trouser leg. This was so that no 'bulge' was visible when wearing the tight uniform trousers of the time. It's said it's from this that the expression 'dressing to the right' (or left) comes. But there isn't a single written record from the time of Albert (or any Victorians) having genital piercings. Far from being 'kinky', Albert was a bit of a sexual prude. So it's highly likely the story's all a myth. And Queen Victoria would not be amused!

More on piercings including comments posted by men who've been pierced can be seen at www.bmezine.com

Piercings and condoms

Most of the times that condoms are used with piercings there's no problem. In fact, far from piercings not being okay with condoms, it's especially important to use rubbers for sex during the healing period to keep the site free of infection. Some suggest dabbing a little lube on the piercing before putting the condom on to make it less likely to get caught in the condom when you take it off. But don't overdo the lube as too much inside the condom makes it more likely the condom slips off. *Ampallangs* and *apadravyas* are the hardest on rubbers. If you're fucking without a condom, cock piercings could make damage to the arse lining or cock more likely, so if one of you had HIV this would make it easier for the virus to be passed on.

Ampallang A rod goes through the cock head (side to side) - it can take months or up to a year to heal.



Apadravya A rod goes through the cock head running back to front - it can take months or up to a year to heal.



Foreskin piercing A ring going through the tip of the foreskin, (but not done in such a way as to stop the foreskin rolling back).

Guiche The ring goes in through the back of the ball sack and through the perineum. Can take several months to heal, and be easily irritated, rejected by the body or move from original placement.



Shaft piercings A rod going through the underside of the shaft of the dick.

Hafada A ring goes through the upper part of the ball sack, between the legs.



Meat and Two Veg

A feast of fun, from wanking to 'watersports'



Wanking

When wanking your or another guy's dick remember the head is more sensitive than the shaft and the frenulum is the most sensitive part. Here are some possibilities:

- With or without lube.
- By hand or by humping the pillow.
- All along the shaft or concentrating on a single spot below the cock head.

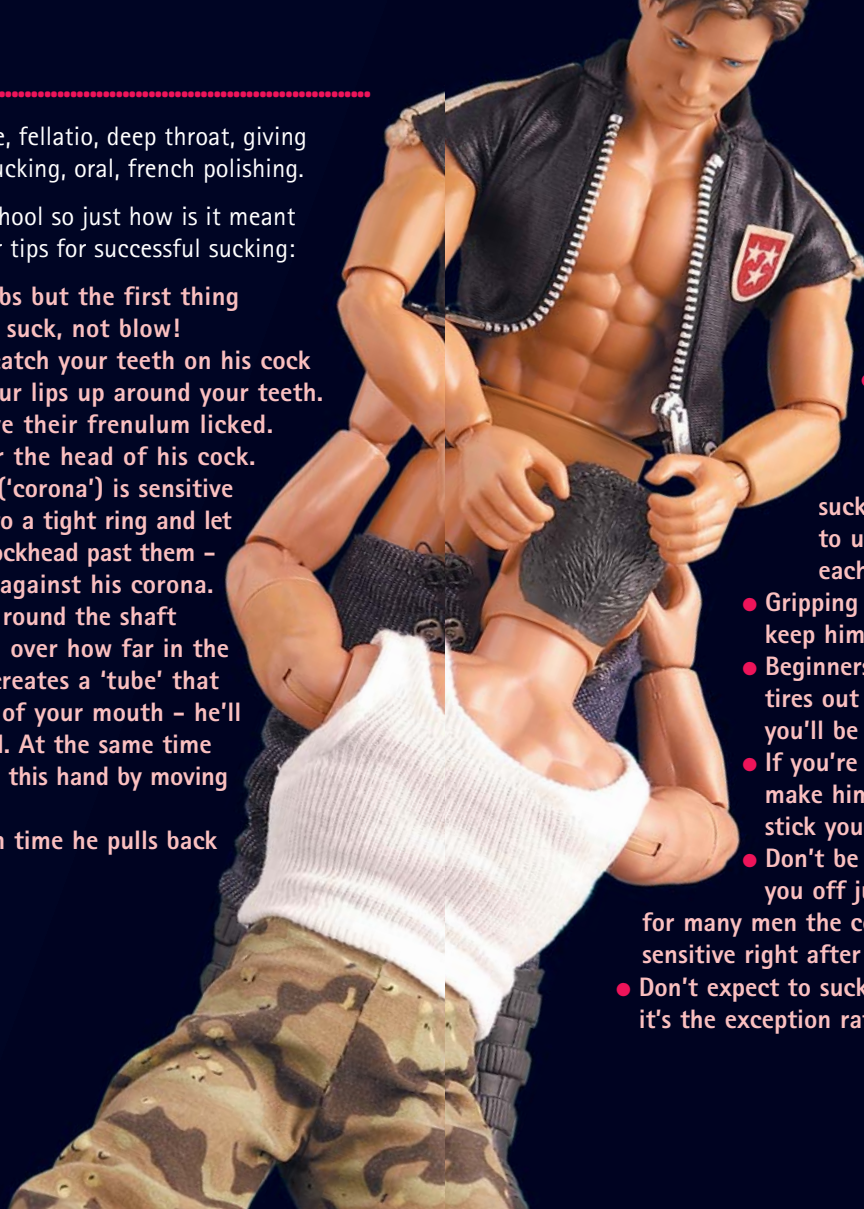
Can you wank too much? There is such a thing as 'compulsive masturbation' when wanking is becoming an overwhelming urge, taking over your life, getting in the way of sex and relationships with others, etc. Then a sex therapist can help. But 'compulsive masturbation' is rare. Nearly everyone masturbates - teenagers often wank 5 or more times a day. Your body will let you know if you're overdoing it - you'll have a sore dick or you'll have no cum left until your balls can make some more!

Sucking

Aka blow job ('BJ'), gobble, fellatio, deep throat, giving head, cocksucking, face fucking, oral, french polishing.

No-one teaches you at school so just how is it meant to be done? Here are your tips for successful sucking:

- People talk of blow jobs but the first thing beginners learn is you suck, not blow!
- Make sure you don't catch your teeth on his cock head - slightly curl your lips up around your teeth.
- Many men like to have their frenulum licked.
- Try licking his balls or the head of his cock.
- The edge of the head ('corona') is sensitive too. Make your lips into a tight ring and let him keep forcing his cockhead past them - he'll love the friction against his corona.
- By gripping your hand round the shaft you have more control over how far in the cock goes - this also creates a 'tube' that acts like an extension of your mouth - he'll feel his dick is encased. At the same time stimulate his cock with this hand by moving it up and down.
- Take your breaths each time he pulls back out of your mouth.



- By varying the speed and motion of your sucking you'll prolong the blow job but the best way to suck him to orgasm is usually to use a steady rhythm with each stroke the same.
- Gripping the base of his cock will keep him hard.
- Beginners often find their mouth tires out but with practice you'll be able to go for longer.
- If you're flagging and want to make him more likely to cum stick your lubed finger up his arse.
- Don't be offended if he pushes you off just after cumming - for many men the cock head becomes super sensitive right after orgasm.
- Don't expect to suck someone to orgasm - it's the exception rather than the rule.

Gag reflex

A little retching may make him feel big and powerful but here are hints at controlling gagging ...

- Tilting your head back makes a straight line from your mouth to the back of your throat.
- Breathe in as the cock pulls back out of your mouth.
- You can control how much cock you take into your mouth by holding the dick with your hand wrapped round the shaft. That way you control the level of thrusting and how far into the mouth the dick goes.
- Over time men's gag reflex gets less and their body learns to get used to cocks in the mouth and throat.
- To avoid being sick, it's wise not to suck too soon after eating!



Positions

When you're kneeling in front of the man you're sucking, his erection often points upwards – but your throat curves downwards in the opposite direction. So the trick is to manoeuvre your head and mouth so that somehow the dick fits. Any position that causes your mouth and throat to lie in a straight line will make sucking easier, eg. tipping your head back opens your throat more and creates a straight line.

The easiest position for taking a dick is when the cock curves down the throat matching the way the throat curves itself. The best ways to get this is to have him lying one way and you lying the other way (your feet near his head, the same position as a'69') – now the curve of his hard-on matches the curve of your throat. You can also achieve this by lying on a bed, your head dangling over the edge, while he stands in front of you – now his erection is at the same angle as the bend of your throat.

Deep throat

This is when you take a cock so far down the throat that you go past the point which triggers the gag reflex. You also can't breathe as the dick is blocking your airway so you can only deep throat for as long as you can go without taking a breath. Don't try to suck – it's impossible. Just let him move his cock. Your throat can ache for a day or so after deep throating.

How safe is sucking

It's not clear how many gay men have got HIV from oral sex – but we do know that it does happen. The vast majority of gay men with HIV got it from unprotected fucking, with a much smaller number getting it from sucking. We think that most guys who got HIV from oral sex got cum in their mouths while sucking off a man with HIV.

HIV is in the cum and pre-cum of men with HIV. Used properly, a condom can stop HIV being passed on during cocksucking.

Some men who don't have HIV use condoms to stop cum or pre-cum getting in their mouth.

If you don't have HIV and decide not to use condoms for cocksucking, you can reduce the risk of picking up HIV by:

- Not getting cum in your mouth.
- Not sucking cock when you have a throat infection, even if it's not sore.
- Not sucking cock when you have bleeding gums, or have had dental work in the last couple of weeks.
- Not sucking cock if he has cuts or sores on his cock.
- Doing it fewer times with fewer men.

Some men with HIV wear a condom to stop cum or pre-cum getting in their partner's mouth when being sucked off.

If you have HIV and decide not to use condoms for cocksucking, you can reduce the risk of passing on HIV by:

- Not cumming in the other guy's mouth.
- Not getting sucked if you have cuts or sores on your cock.
- Not getting sucked if you have another STI or a high viral load.
- Doing it fewer times with fewer men.

Spit or swallow

In terms of getting HIV there's probably little difference. Spitting may bring HIV into contact with bleeding gums, swallowing gives it chance to enter through the throat lining. Although stomach acid kills HIV the virus could enter the bloodstream through the mouth or throat long before cum reaches the stomach. Avoiding pre-cum and cum in the mouth is safest. The longer cum stays in the mouth the more risk.

It's also possible for a range of other STIs, including gonorrhoea, syphilis and herpes, to be passed on or picked up during sucking.



69ing

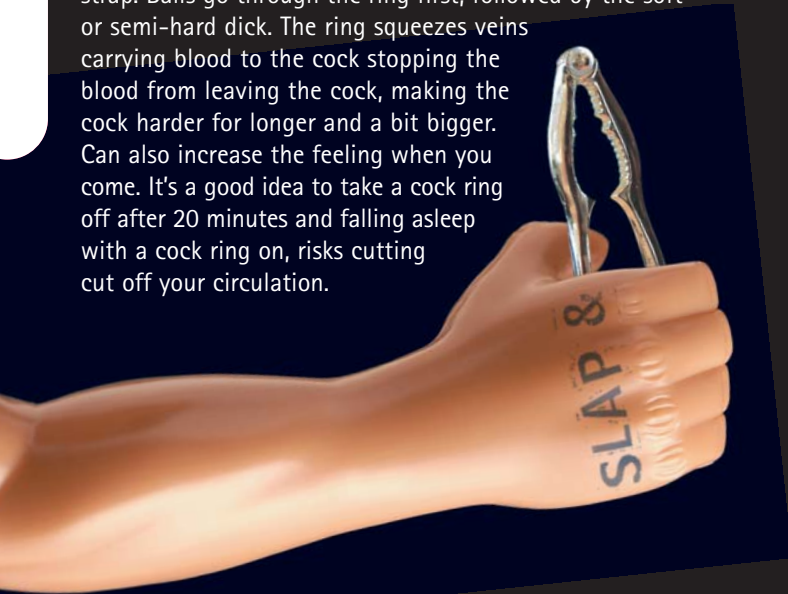
This is when you both suck and get sucked at the same time. One of you lies on your back, the other positions himself so that he can suck his partner's cock while his partner sucks him – although the guy underneath might feel pinned to the bed and unable to control his partner's thrusting. This won't happen if you're lying on your sides facing each other, your face in his groin, his face in yours (like the 6 and 9 in 69). Some men find it hard to concentrate on sucking and being sucked, others find it a sensation overload but 69ing has plenty of fans who like the idea of having double the fun.

Ball play/CBT ('cock and ball torture')

The balls can be supersensitive but the right level of touch can be a turn-on – and some men get off on quite heavy play. Stretching the sack, lightly spanking, tying up the balls and cock or hanging weights from them are just some ways you might get your kicks. If balls or any part of the body that are tied up go blue or cold untie straight away as the blood flow is being cut off.

Cock ring

A metal, rubber or leather ring, sometimes with adjustable strap. Balls go through the ring first, followed by the soft or semi-hard dick. The ring squeezes veins carrying blood to the cock stopping the blood from leaving the cock, making the cock harder for longer and a bit bigger. Can also increase the feeling when you come. It's a good idea to take a cock ring off after 20 minutes and falling asleep with a cock ring on, risks cutting cut off your circulation.



Be sure to choose one that's not too tight. Adjustable straps are better for beginners. If a cock ring or a similar sex toy gets stuck, try a cold bath or shower to make the dick shrink, put on plenty of lube, be patient and stay calm. Get medical help if you still can't get it off after an hour.

Ball spreaders

Made of leather, denim or nylon, they can enhance sensitivity and delay ejaculation. If balls can't rise up towards the body it's harder to come, so ball spreaders prolong pleasure and increase feeling in the ball sack.

Arab strap

A leather harness worn on the cock and balls to keep you hard or make your 'package' look bigger under clothing.

Parachutes

Parachute-shaped devices with a hole in the middle for the ball sack to pass through, with the parachute resting on top of the balls. Weights hang from chains below the parachute.



Vacuum pumping

Vacuum pumps remove air from around the cock creating suction that draws blood and other fluid to the penis leaving it temporarily bigger than before – though the erection may be bluer, wetter or less hard than normal. You'll need to put on a cock ring to keep this enlarged erection. Pumps can be battery-run or manual and the effect lasts around 20 minutes. The advice is not to pump for more than 15 minutes at a time. Bruising or tiny blood blisters are common and there is risk of permanent damage from prolonged vacuum pumping.

Watersports

aka 'golden showers', 'yellow', 'WS' – yellow hanky on the RIGHT = piss on me, on the LEFT = wants to piss on you.

'Watersports' means letting piss get on his or your body or clothes – or in the mouth, or drinking it. Drinking plenty of beer – or water, apple or cranberry juice if you want to stay clear-headed – makes sure your urine isn't too salty and smelly.

This carries no risk of HIV or other sexually transmitted infections if piss gets on skin that has no sores or cuts.

Usually piss is nearly sterile but if you drink piss there's a theoretical risk of getting or passing on STIs as it can carry herpes viruses and other bugs. Piss can carry blood (and in this blood can be HIV) if someone has a kidney infection but generally piss play is one of the safest kinds of play. Piss without blood in it can still contain minute amounts of HIV but not in an infectious form.

Pissing into someone's arse can be risky as it involves a cock inside someone without a condom, meaning the possibility of leaking infected pre-cum or cum into someone or coming into contact with their infected blood.

You can find out more about watersports, vacuum pumping, CBT and a whole load of other types of sex at www.hardcell.org.uk



Blue Balls

'Blue balls' is the name given to the ache some men get when they're sexually aroused for a long time but don't cum. Some men's ball sack may also look a little bluish due to changes in its blood supply. The ache will go within a few hours or if the man ejaculates.

Epididymitis

Means 'inflammation of the epididymis' (see p4-5 for what and where yours is). It happens when the epididymis gets blocked up with sperm or it can be caused by sexually transmitted infections. Symptoms include pain first in the belly then the balls, fever, chills and swelling. Treated with antibiotics and drugs to control inflammation.

Testicular cancer

Testicular cancer (cancer of the balls) makes up 1% of all male cancers and there's a 1 in 500 chance a man will get it in his lifetime. Around 1 in 25,000 men a year are diagnosed with it, with 15-30 year olds most likely to get it. The good news is that it has nearly a 100% cure rate if caught early.

The cause of this cancer isn't clear although you're at greater risk if a brother or father has had it. Symptoms include a usually painless lump the size of a pea (or larger) in the ball sack. There can also be a feeling of heaviness in the balls or aching in the groin or lower belly, possibly fluid in the ball sack.

Doctor Dick

From pus and piss to pubic lice -
when dongs go wrong

Tests and treatment - an ultrasound test (sound waves bounced off the testicle) will check for cancer. Depending on the type of cancer, it's treated with radiation therapy or drugs together with chemotherapy. Surgery to remove the cancerous testicle is always carried out to stop the cancer spreading, with it being replaced with a false testicle if the patient wants this. The remaining testicle is enough to produce sperm and male hormones.

Testicular self-examination

You can check for testicular cancer yourself - monthly self-examination is the best way to catch the disease early. The best time is after a warm bath or shower when heat has relaxed the ball sack, making it easier to feel anything unusual.



Stand in front of a mirror. Check for swelling on the ball sack. Examine each ball with both hands. Place index finger and middle finger under the ball with thumbs placed on top. Gently roll the ball between thumbs and fingers. Don't worry if one

ball is a little bigger than the other - this is normal. Also, don't mistake the epididymis for an unusual growth. That's the soft tube-like thing behind each ball. If you do find a suspicious lump you need to see a doctor (or sexual health clinic). It could be a harmless cyst or swelling but if it's not, early treatment is the key to the high cure rate for this cancer.

More information can be found at:

www.cancerbackup.org.uk/cancertype/testes

Phimosis

Phimosis is when the foreskin is too tight and cannot be pulled back over the head of the cock. All boys are born with this but for most the foreskin soon loosens. It's not unusual for adolescents to have difficulty pushing their foreskins all the way back (making wanking or sex tricky). Some men never can pull back their foreskin all the way but don't report any problems - although it makes cleaning under the foreskin difficult. The vast majority of boys with phimosis don't need surgery as with time and gentle gradual stretching under the supervision of a doctor the problem can be put right. Steroid creams also loosen the foreskin. A 'z-plasty' is a surgical cut in the foreskin to loosen it - only rarely is full circumcision needed. Some men's foreskins can't be pulled all the way back over the head when erect and this doesn't bother them. But if it's painful then the above things are all options.

Paraphimosis

This is when the foreskin goes back over the head of the dick and can't be rolled back. It's rare but if it happens you need to see a doctor straight away as it can cut off blood supply to the cock with very serious consequences. To avoid it happening, it's best not to leave your foreskin pulled back over the head of your cock for any length of time.

Peyronies disease

Many healthy cocks have a slight bend but if the bend is very noticeable, especially if painful then it could be Peyronie's disease. This is a medical condition in which the penis develops a bend when hard – the curve can point up or down, be mild or very obvious. Around 1% of men will experience this, usually men over 40. The condition can develop slowly over a year or very suddenly. The cause is often not known, although it can run in families. One cause can be an injury to the cock during vigorous thrusting when the cock bends awkwardly. Blood vessels inside are damaged and scar tissue forms then hardens causing the dick to curve when erect. The condition usually stabilises after about a year and that's when treatment options can be discussed. For some men the condition clears up on its own, with the cock returning to normal but some men are left with a pronounced curve which can be painful and make sex difficult. A range of treatments can be tried from vitamin E (increasing the cock's flexibility) to injections into the dick, with surgery to correct the bend only used in a small minority of severe cases. Men with Peyronies disease should **only use Viagra with caution.**

Priapism

Priapism is a long lasting and often painful erection lasting several hours to a few days. It's not caused by being turned on but by certain medical conditions stopping the usual blood flow out of the penis. Many men and boys with sickle cell blood disease experience it. But the main cause is men injecting into their penis medications to treat impotence (they inject a higher dose than prescribed by their doctor).

Some anti-depressants and drugs like marijuana, ecstasy and cocaine have also triggered priapism, as can injuries to the penis. Viagra on its own seems not to cause Priapism, but there have been a few cases of it being caused by taking Viagra and ecstasy together. If a hard-on lasts more than 2 hours urgent medical treatment to restore normal blood flow is needed as **untreated priapism can lead to a damaged cock and permanent impotence.**

> DID YOU KNOW ?

Priapism is named after Priapus the Greek god of fertility who is always shown in statues and pictures with a constant hard-on.

Doctor! Doctor!

Many sexually transmitted infections (STIs) can show themselves through symptoms affecting your cock (as well as your arse, throat, mouth and elsewhere). It's possible to have an STI and not notice symptoms but here are dick-related signs that something's wrong and needs checking at a sexual health (GUM) clinic.

Drippy dick

Discharge (white-ish/yellow pus) from the urethral opening of the cock can be caused by 3 infections:

1 Gonorrhoea (aka 'the clap')

This bacteria can also cause **stinging when pissing** or the feeling you want to piss but can't. Symptoms can show 2-7 days after sex with an infected person (someone with gonorrhoea in the throat sucked you off or you had your dick up an arse infected with the bacteria). Treated with antibiotics.

2 Non-specific urethritis (NSU)

Aka non-gonococcal urethritis (NGU) – general term for inflammation of the urethra that's caused by bacteria (but not the gonorrhoea bacteria). Often similar symptoms to gonorrhoea (creamy discharge often with stinging on pissing), caught in the same way. Symptoms may start about 5 days after sex with an infected person but sometimes symptoms may not be noticeable. NSU can also be caused by lots of sex or wanking that makes the urethra inflamed and sometimes is caused non-sexually by something irritating the urethra. Treated with antibiotics.

3 Chlamydia

Bacterial infection of the urethra which can cause discharge, pain on pissing and/or pain in the balls (although it can be symptom-free). Caught during sex with an infected person in the same way as gonorrhoea and NSU. Treated with antibiotics.

4 LGV

A rare type of chlamydia can cause Lymphogranuloma venereum (LGV). This can cause a sore on the dick, followed by discharge, followed by swollen glands in the groin. LGV can also cause nasty inflammation in the arse. LGV is cured with 3 weeks of antibiotics.

Sore point

Blisters on the dick can be caused by 2 infections:

1 Genital herpes

Viral infection that causes first redness and itching then blisters on the cock (also on the lips and in the arse). Over about 2-3 weeks the blister will burst, oozing very infectious clear fluid, gradually scab over then heal. You might get aches, swollen glands, flu-like feelings, especially the first time you get blisters, which can be painful.

Herpes on the cock is caught after being sucked off by someone with a 'cold sore' around or in their mouth or by putting your cock in an arse that has herpes blisters (possibly inside where you can't see them). Sometimes someone can have no blisters but still be able to pass the infection on to others. You can have the virus for a long time (weeks or months) before showing symptoms so it can be hard to be sure who the infection came from. Avoid sex with anyone with a 'cold sore' as this can cause genital herpes. Treatment - there's no cure - once you are infected the virus stays in your body for life, but your immune system normally keeps you symptom-free. Many don't get another outbreak of blisters but some get blisters now and again, especially if their immune system is low and they're stressed or run down. Acyclovir (in tablets) can make blisters heal quicker or stop them if taken early enough (a GP can prescribe it). If you get regular outbreaks (eg. if you're HIV positive) you can be given daily tablets to prevent the blisters. Acyclovir cream for 'cold sores' can't be used on your genitals. Pain-killers like Solarcaine or Xylocaine and bathing in salt water can ease pain.

Herpes Viruses Association Helpline 0845 12 32 305 (office hours) www.herpes.org.uk

2 Syphilis

A bacterial infection that as well as causing a rash (on the hands, feet, genitals and body) can also cause a sore ('chancre') on the cock, arse or in the mouth. The usually painless red sore will eventually scab over and heal but you will still have syphilis. Glands in your groin or neck may swell up. Someone else touching the sore (or rash) can catch syphilis. A blood test lets you know if you have syphilis, if so antibiotics cure the infection. Left untreated syphilis can lead to major problems with the heart, bones, nerves, brain and other parts of the body.

Warts 'n' all

Growths on the cock can be caused by:

Genital warts

This is a common viral infection that a few weeks or months after sex with an infected person can cause pinhead size growths, mostly on the head of the cock (also in and around the arse). Usually more than one they become larger 'cauliflower-shaped' pale growths that may also itch. Contact with an infected person's skin during sex can pass them on, even if you can't see any warts. Treatment: the wart virus stays in your body for years and they can come back after being treated. The sooner warts are treated the easier they are to deal with. You can't treat genital warts with cream for warts on the hand. Instead a doctor will freeze them off or use cream or a mild acid to remove them. It can take several trips to the clinic before they go. Or the clinic may give you cream to put on them at home.

Don't confuse warts with harmless 'pearly penile papules' - small pale bumps on the underside of some guy's cock heads.

Raw hide

A rash or red or white patches on the cock can be caused by:

1 Syphilis (see p39)

2 An allergy (possibly to the latex in condoms or spermicides used in some lubes and on some condoms). Polyurethane condoms (sold in the UK under the Avanti trademark) have been created for people allergic to latex. Many condoms come without spermicide (the packaging will say).

3 Thrush

Rare for gay men unless your immune system's been weakened by HIV. Sometimes it can be passed on by sex but usually it's caused when too much is being made of a natural fungus (candida) normally found on your body. The cock's skin can be itchy, inflamed, possibly with pain during sex or when peeing. There may be sticky white patches, for example under your foreskin. Treatment: anti-fungal creams or tablets

4 Balanitis

Inflammation of head of the cock or foreskin, giving either redness, swelling, pain or pus. It's mostly due to a yeast infection or reaction to detergents or latex. Wash with clear water only, dry carefully (eg hairdryer on 'warm') or get your doctor to check it out to be prescribed an antifungal cream.

Up to scratch

Itching around the cock and balls can be a sign of 2 infections:

1 Pubic lice (aka 'crabs')

The most common STI, 'crabs' live in body hair and are pin-head size when grown, although their tiny dark eggs can also be seen stuck to hair. 'Crabs' prefer pubic hair, hair around your balls and arse but also body hair in general (but not head hair). The lice can live about 24 hours away from the body so could be picked up from clothes, towels and bedding. Symptoms include itching or maybe a rash. These start within days of sex with an infected person but it can take 2-3 weeks. You can usually see the lice in the hairs.

Treatment can be done at home with creams bought in chemists (no prescription needed). Brands include Quellada, Derbac, Lyclear and Prioderm and are usually left on the whole body for up to 24 hours, with treatment repeated a week later.

2 Scabies

An infection cause by invisible mites that burrow under the skin causing intense itching for most people (though some hardly notice a thing). Itching usually starts 2 or more weeks after sex with an infected person – you can get them from sharing beds, towels etc but it's rare. If you've had scabies before you'll itch sooner. You may see red lines in the skin, with cock, arse and balls possibly infected, as well as hands and feet. Treatment is similar to treating 'crabs' although you may itch for a few weeks even if the mites have gone.

A 'wee' problem?

Weeing lots can be an early sign of diabetes (especially if you're always thirsty). Peeing often but not feeling you've emptied your bladder can be a sign of bladder or prostate problems (as can having to get up several times in the night to pee or 'dribbling' after you've pissed). Many men as they get into middle age start to notice prostate-related symptoms like these. For more info on your prostate and prostate health search for 'bottom line' at www.tht.org.uk.

If your piss suddenly becomes dark this can be a symptom of hepatitis A or B. You can get vaccinated against hepatitis A or B for free at sexual health clinics. See p49 for where to get more info on the three most common types of hepatitis (A, B and C). And if your piss is darker than pale yellow it's a sign you need to be drinking more liquid.

Blood in your piss is often a symptom of a bladder infection or kidney problems. Sometimes a blood vessel in your urethra can break during sex or wanking causing you to piss blood but this will quickly heal itself.

Double trouble

STI + HIV = more risk that HIV's passed on.

If you have HIV and another STI you can have higher levels of HIV in your blood and cum as your immune system is trying to deal with two infections at once. Also, any inflammation or sores the STI causes on your cock offer an easier way for HIV to get out of your body and into someone else's. Using a condom makes it less likely STIs and HIV are picked up or passed on.

> DID YOU KNOW ?

Drinking cranberry juice daily is good for keeping your bladder and urethra healthy. It makes it harder for bacteria to live in your 'waterworks'.



When Willy Won't

If hard-ons and ejaculation don't 'cum' easy

It's a difficult subject to talk about, but sexual difficulties are very common. For example, every man has experienced being unable to get an erection at least once. But men who experience this often might deny to themselves there's a problem or be too embarrassed to seek out help. And if they do go for help they often want a quick fix for what can be a complicated problem that's taken a long time to develop.

Problems and how to tackle them

Can't get hard? Come too quickly? Can't come at all? Hard-on and orgasm problems can have a physical cause but often the cause is routed in the mind. If physical causes can be ruled out, lack of a hard-on or orgasm problems are often a sign we don't like the sexual situation we're in. This can be caused by feelings of fear, anger or guilt. Sex therapy/ counselling is a good way to get to the bottom of what's really bothering us and learning ways to get back hard-ons and improved ejaculation.

GPs often aren't too knowledgeable about sex problems, especially gay men's, but they can refer to sex clinics and sexual counsellors/therapists - but make sure who you see knows about gay men's sexual issues. Sexual health clinics can refer you without involving your GP. Also check out p49 for how to find a sexual counsellor.

There's useful information about erection problems and other sex-related difficulties at www.hardcell.org.uk/bunker04.htm

Problems with hard-ons

Losing erections or not being able to get one at all happens to most men at some time. Causes can be:

- Tiredness or feeling ill.
- Alcohol or recreational drugs.
- How we're feeling about ourselves or who we're having sex with.
- Problems using condoms.
- Fear of getting or passing on HIV.
- Depression, stress or anxiety possibly connected with sexual experiences in the past.
- Side effects of prescribed drugs eg some anti-depressants or HIV treatments.
- Circulation or heart problems (maybe related to ageing or smoking).
- Lack of the male hormone testosterone (some men with HIV can experience this).

If you find you often can't get hard-ons, this is called 'erectile dysfunction' (it used to be called 'impotence'). It's common for worrying about getting a hard-on itself to stop you getting hard!

And it's important to know that losing an erection during sex – especially when getting fucked – is perfectly normal.

Tips for enhancing your hard-on:

- Stopping smoking (smokers are twice as likely to have hard-on problems).
- Aerobic exercise (running, swimming, cycling etc make your heart better at pumping blood to your dick).
- Low fat diet (helps keep your arteries from being clogged with fat and less able to get blood to your dick).

Viagra™

The prescription-only drug Sildenafil Citrate (usually known by the brand name *Viagra*) is helping a lot of men with erection problems. It only works if you get aroused – it cannot make you 'turned on' – if you don't feel aroused it won't get you hard. It needs to be taken some time before sex as it can take up to an hour to start working. The effects can be felt for up to 4 hours but that doesn't mean your hard-on lasts 4 hours! Both Viagra and poppers lower blood pressure. Taken together it might be possible that a deadly drop in blood pressure could happen. Viagra stays in the body for up to 24 hours, so avoid poppers for that time period. Viagra shouldn't be taken if you have heart or blood pressure problems without getting medical advice first.

If sex therapy, drugs like Viagra or vacuum pumps don't work, there are surgical procedures that can make hard-ons possible again. These include injections into the penis or implants, but few men will need them.

Herbal hard-ons

You'll see adverts in the gay press and on the Web for 'herbal Viagra' or herbal remedies with names that sound a lot like Viagra. Most of these dietary supplements claim to increase circulation to the penis or increase libido but it's difficult to know what the ingredients are and what dose you're buying. There's a lack of reliable scientific studies to show how much effect (if any) these products have. Yohimbine and ginkgo biloba are two herbal extracts it's claimed can enhance erections. If you have high blood pressure, diabetes, kidney problems or are on any medication, it's best to tell your doctor if you're planning on trying herbal remedies.

Tail End

Useful websites, books and other stuff



Websites

Sexual counselling/therapy

www.basrt.org.uk (details of 'paid for' therapists)

www.pinktherapy.co.uk (for 'paid for' gay therapists)

You can ask your GP for sex therapists free on the NHS, or ask about this at your GUM (sexual health) clinic. Sex and relationship counselling is available at some **Terrence Higgins Trust** centres - call **THT Direct Helpline** for details on **0845 12 21 200**.

Sexually transmitted infections

www.chapsonline.org.uk/infections

www.ssha.info (includes clinic details for the UK).

www.herples.org.uk

www.hepinfo.org (hepatitis A, B and C).

Other useful web sites

www.hardcell.org.uk (info on S&M and rough sex).

www.penisresearch.com

www.chapsonline.org.uk/biology (info on how HIV is spread during oral, anal and other types of sex, post-exposure prophylaxis, the link between HIV and poppers, and more).

Circumcision/foreskin restoration

www.norm.org

Free Booklets

Available free in gay bars, or from **THT Direct Helpline 0845 12 21 200** and organisations listed on p52.

The Bottom Line

All you need to know about arses, anal sex and health



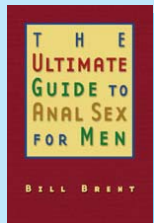
The Manual

Sexually transmitted infections & clinics

Books

Ultimate Guide
to Anal Sex
for Men
by **Bill Brent**
Cleis Publications

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Gay Sex - A
Manual For Men
Who Love Men
by **Jack Hart**

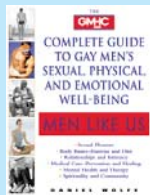
Alyon Publications



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Sex Adviser -
the 100 Most
Asked Questions
About Sex
Between Men
by **Tony Palermo**

Alyon Publications



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Men Like Us -
The GMHC
Complete Guide
to GayMen's
Sexual, Physical
and Emotional
Well-being
by **Daniel**

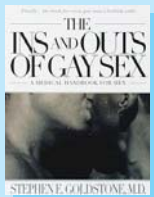
Wolfe *Ballantine
Books, New York*



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Sex Tips for
Gay Guys
by **Dan**
Anderson

St Martins Press



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Anal Pleasure
and Health
by **Jack Morin**
Down There Press

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Anal Pleasure
and Health
by **Jack Morin**

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Index

Balanitis	page 41	Pearly penile papules	40
'Blue balls'	33	Penis enlargement	14
Chlamydia	38	Perineum	3/19
Circumcision	8/9/16/35/49	Peyronies disease	36
Cock & ball play	28-29	Phimosis	35
Cock ring	28-29	Piercings	16-19
Cock size	11-15	Poppers	47
Condoms	9/18/26	Priapism	36-37
Corona	3/22	Prostate	4/5/42
Corpora cavernosa	4/5/6	Scabies	42
Cowper's gland	4/5	Scrotum	2/9/19/33-34
'Crabs'	41-42	'69ing'	27
Deep throat	25	Smegma	6
Epididymis	4/5/33-34	Sperm	4/9
Erection problems	45-47	Sucking	22-27
Foreskin	2/7-9/16/19/35/49	Syphilis	39/40
Frenum (Frenulum)	3/8/21	Testicular cancer and self-examination	33-34
Gag reflex	24	Testicles	4/5/9/34
Glans	2	Thrush	41
Gonorrhoea	37	Urethra	4/5/7
Hard-on	6/11/12/36/37/45-47	Vacuum pump	14/30/47
Hepatitis	42	Viagra	36/37/47
Herpes	27/31/38/39/49	Wanking	21
HIV	6/7/9/26/27/31/43	Warts	40
NSU	38	Watersports	31
Paraphimosis	35		

CHAPS is a partnership of community-based organisations, co-ordinated by **Terrence Higgins Trust**, delivering HIV prevention initiatives to gay men and bisexual men in England & Wales.

CHAPS partners:



Associate partners:



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1 Package Tour

A journey round your cock and balls.

2 Clever Dick

Size and shape - the long and the short of it.

3 Meat and Two Veg

A feast of fun, from wanking to 'watersports'.

4 Doctor Dick

From pus and piss to pubic lice - when dongs go wrong.

5 When Willy Won't

If hard-ons and ejaculation don't 'cum' easy.

6 Tail End

Useful websites, books and other stuff.