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Human instinct and intoxication: The african quest for sexual longevity and its hidden adverse health effects

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Abstract

Over the course of history, people have always been driven by their instincts to find health, happiness, and longevity. Africa is full of herbal aphrodisiacs, pharmaceutical stimulants, and alternative treatments. This is because of the quest for prolonged sexual performance otherwise known as Sexual longevity (SL), which is happening because old practices are being mixed with new ones. Strong human instincts, culture beliefs and changing biomedical factors lead to these behaviours, even though they often come with big hidden risks like adverse health effects, exploitation, and effects on society and public health. This study looks at the biological, psychological, and social aspects of attempts to SL. It also looks at how instinct influence intoxication drug and substance abuse in the quest to achieve SL. In this paper, the health risks and toxic effects of excessive consumption of energy drinks, alcohol, their combination, and herbal aphrodisiacs on sexual libido are emphasized, along with their impact on public health and social order.

Key words: Aphrodisiacs, Sexual longevity (SL), Human Instincts, Intoxication, Adverse health effects

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1. Introduction

African couples' pursuit of sexual endurance and vigour has resulted in the use of uncontrolled substances and the misuse of synthetic drugs, alcoholic beverages, and energy drinks. Sexual longevity, defined as the capacity to sustain pleasure, satisfaction, and fulfilment over time (Krychman and Eilber, 2024), is influenced by cultural beliefs and societal norms (Khumalo *et al.*, 2020). African cultures are increasingly shaping global sexual trends (Saheed, 2023). Those seeking SL are progressively employing various synthetic and traditional substances in ambiguous and unregulated quantities. Compared to females, in a typical African setting the male folks are primarily more vocal and dominant when the context of SL is discussed (Drummond *et al.*, 2006). Although traditional medicine is fast becoming a mainstay in African healthcare settings, especially in rural communities where it is readily available and inexpensive. This may not be the case in contemporary medicine, as there are questions pertaining to its general safety and scientific application (Mutombo *et al.*, 2023). Some technologies purport to enhance sexual experiences; however, they may present long-term risks to health and well-being (Adebayo and Oladipo, 2019).

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As civilizations evolve, sexual health changes, especially in the elderly. Understanding the causes of sexual longevity — cultural, biological, or for greater performance is necessary to assess its public health effects. This study also highlights the problems of the uncontrolled sexual enhancement product business, especially those with unsubstantiated claims. Total well-being depends on sexual health, thus as Africans age, SL treatments will be in demand. Misusing these goods could have serious implications in many African nations due to limited access to official health care and lack of wellness product control (Oluwaseun *et al.*, 2020). The review provides critical analysis of these issues to inform health campaigns and policies to reduce the hidden risks of SL and address cultural, psychological, and social factors that influence these practices.

This article examines African SL customs, beliefs, and technologies, emphasizing their risks and health risks. This paper will discuss conventional aphrodisiacs, the expanding market for sexual enhancement products, and how technology affects sexual function (Babalola *et al.*, 2019). This study will explain how society pressures, including masculinity, sexual prowess, and the cultural value of sexual performance form these practices. It examines the connection between SL and the harmful effects of impulsive and unregulated substance abuse. This includes the use of synthetic drugs, herbal mixtures, alcohol, and energy drinks, along with the associated health risks people face in their pursuit of sexual liberation. The use of illicit drugs prior to or during sexual activity has developed with the introduction of novel psychoactive chemicals in various regions globally, alongside concerns regarding the correlation between illicit drug use and sexual risk behaviors (Melendez-Torres and Bourne, 2016). This study will provide methods to mitigate the health risks associated with prolonged sexual activity. This will enhance the discourse surrounding health, creativity, and cultural values, facilitating public health education and policy development.

2. African SL in history and culture

The African history and sexual life style and life span has been modified that several factors which includes; belief system, cultural identity, personal impression from peer pressure group that is largely influences by cultural heritage from the particular domain or region; as agents such as the family, peers and community play an important role in prescribing acceptable and unacceptable sexual behaviour (Khumalo *et al.*, 2020). In many instances, the discourse surrounding sex and sexual relationships within African societies is shrouded in secrecy and imbued with a certain degree of sanctity (Okechi, 2018). The African history and culture on SL are discussed reflecting on some factors including; belief systems, cultural deficits, attitudes and personal lifestyles.

2.1. Sexual health conventions

Traditional sexual health rituals in many African countries have promoted sexual vitality and lifespan. These practices are often founded on centuries-old indigenous knowledge. Herbal remedies, rites, and spiritual healing were employed to alleviate sexual dysfunctions, boost desire, and improve sexual health. West and Central Africans have utilized Moringa and Epimedium (Horny Goat Weed) to improve sexual health (Kamatenesi-Mugisha and Oryem-Origa, 2005; Edwards *et al.*, 2015). Along with massages, these plants are said to improve sexual energy. Herbalists and spiritual leaders have provided much sexual health advice (Moore *et al.*, 2022).

2.2. Cultural perspectives on longevity and sexuality

Sexuality in some African climes is seen as a rating of energy and status in men, it is also closely linked to longevity and vitality. Some societies need males to show sexual prowess beyond old age in order to demonstrate their vitality and capacity to help their families. This cultural norm emphasizes lifelong sexual health. SL can also indicate social stability because older people are perceived as wise, energetic, and experienced in sexual situations (Beerepoot et al., 2022). However, sexual inactivity or decrease may reduce social relevance, vitality, and power. This notion can motivate people—even in old age—to investigate sexual decline. In some cultures, elderly individuals are revered for their sexual experience; therefore, preserving sexual health is a priority. However, sometimes, the need to maintain sexual performance and virility leads to risky or culturally recommended treatments that can harm.

2.3. Development of ideas and approaches

The ideas on African sexual endurance have changed greatly with time. African views on sexuality and health have changed with colonialism, Western medicine, and globalisation. Western health, medicine, and ageing

models have either included or eliminated traditional sexual health practices. Treatment of erectile dysfunction and fertility is increasingly using complementary and alternative therapies comprising dietary supplements and herbal remedies including dietary supplements and herbal remedies (Leisegang and Finelli, 2021). Notwithstanding continuous development, several African countries combine contemporary and traditional medicine. Pharmological restrictions and related adverse effects have helped to highlight indigenous knowledge more and more. The development of these ideas and methods points to a trend of more syncretism—that is, the coexistence of old and modern activity in intricate and sometimes contradictory ways. In contemporary cultural settings, some individuals and groups strategize to maintain high level of sexual vigor which they consider to be very important (Achen et al., 2021).

3. Human instinct and sexual health

In African settings, human instinct has influenced intimacy and reproductive health. However, there are some complex factors that sharpen sexual dynamics, including physical appearance, hormonal balance, socio-cultural factors, and even the evolutionary adaptation of that particular society. Natural approdisiacs, mixed alcoholic beverages, and tramadol have been used in African societies to prolong sexual longevity, which may be harmful. Instinctual impulses influence reproductive techniques, hence internal and external factors can alter health (Sharma et al., 2013). Understanding the biological, evolutionary, and learnt aspects of human sexuality helps one understand the pros and cons of natural sexual activity.

3.1. Longevity and sexual drive

The sexual drive for human is basically governed by certain neuroendocrine hormone including the Testosterone and oestrogen that boost libido; as well as dopamine and oxytocin that aids enjoyment and bonding respectively (Seshadri, 2016). A balanced hormone is essential SL due to the fact that the hypothalamic-pituitary-gonadal (HPG) controls sexual quest and efficacy. Social pressures in Africa have led to an increasing dependence on synthetic sexual enhancers, which can cause neurological and cardiovascular disorders (Brunetti *et al.*, 2020). These medicines enhance lifespan, but they can disrupt biological rhythms, causing reliance and other effects. Ageing changes arteries and lowers hormone levels, so influencing sexual performance. Although synthetic testosterone and erectile dysfunction drugs are popular, people naturally search for sexual lifespan. Though their safety and efficacy are hotly debated, traditional herbal treatments are rather popular in Africa (Moreira *et al.*, 2014; Mutombo *et al.*, 2023).

3.2. Evolutionary views of human sexuality

Human sexuality is largely characterized by fecundity efforts and the choice of partner involved. Postulates of the Darwin theory suggest that the desire for sex considers genetic factors together with biological and environmental conditions (Ryan, 2021). The excessive use of sexual enhancers can lead to addiction, psychosomatic dependence and infertility (Payne *et al.*, 2019; Al-Madhagi and Tarabishi, 2024). Furthermore, stresses in developing risk-taking, spouse guarding, and polygamy are evolutionary theories, including sexual selection. Reproduction might cause destructive behaviors, including the abuse of pharmacological stimulants. Modern treatments for SL can ignore the body's natural systems that control it, even if they are based on past patterns of mating. Unexpected physiological and psychological effects may result from this (Al-Madhagi and Tarabishi, 2024). The evolutionary ideas help separate deliberate, health-conscious decisions from inherent sexuality.

3.3. Sexual health instincts and learning

Activities related to sexual health mix knowledge with instinct. Though they are biologically natural, environmental and cultural factors significantly affect sexual behaviour. Notwithstanding the risks to health, African populations are increasingly adopting the use of performance-enhancing drugs such as tramadol in conjunction with alcoholic beverages. Abuse of drugs and alcohol lowers arousal and raises the chance of early ejaculation and erectile dysfunction (Ghadigaonkar and Murthy, 2019). Some drugs meant to improve performance cause dependency and sexual dysfunction. Education and cultural norms help to reduce the

natural inclination for taking risks. While sexual pleasure is biological, the cultural acceptance of intoxicants to enhance performance suggests a demand for instantaneous gratification at the price of long-term health. Abuse of drugs increases sexual risk-taking, STDs, and reproductive failure (Brookmeyer *et al.*, 2019; Hops *et al.*, 2011). Public health initiatives have to reconcile informed, responsible sexual behaviour with natural inclinations to help solve problems.

4. Contemporary developments and strategies for enhancing sexual longevity

A major problem in African countries, SL motivates the creation of several approaches meant to improve sexual performance. Sexual health has been evolved to become influenced by some factors which includes scientific findings, traditional inclination, peer-pressure, and technological advancements; these can be further broken up into the decisions about pharmaceuticals, kind of hormonal treatment, use of herbal supplements, and other digital solutions. Some of these drugs or treatments have negative side effects and might be ineffective.

4.1. Current methods

Phosphodiesterase type 5 inhibitors (PDE5) and the application of other contemporary hormone replacement can alter the prescription of drugs to cause an increase in sexual dynamics. These drugs increased blood flow with risk of cardiovascular dysfunction (Dhaliwal and Gupta, 2023). Overusing synthetic medications in Africa raises the possibility of counterfeit drugs and addiction with adverse consequences. Furthermore, the non-invasive extension of SL includes pelvic floor exercise and psychotherapy (Homsi *et al.*, 2024).

4.2. Herbs, drugs, supplements: Uses

Extensive clinical studies have questioned the general safety and efficacies these supplements (Society of General Internal Medicine, 2023). Besides some of these acclaimed drugs or supplements have been found to contain some unquantifiable amounts of synthetic agents that have potential to cause organ dysfunctions (Ekor, 2014). Besides these herbal remedies, food supplements and nutraceuticals to boost sexual performance and health have become a mainstay. Ginseng are sold as natural sexual performance enhancers (Brunetti et al., 2020). Although some supplements have scientific backing, the absence of oversight in African markets raises concerns regarding contamination and product efficacy.

4.3. Technological development and sexual health

Digital wellness apps and telemedicine improve patient access to sexual health info, therapy, and medications while linking them to providers (Palmer *et al.*, 2020). Furthermore, even injections for platelet-rich plasma and penis implants are emerging bio-medical efforts to restore erectile dysfunction (Israeli *et al.*, 2022). These breakthroughs offer potential remedies, but commercialization of sexual health technologies has led to misinformation and exploitation. Unproven online treatments, artificial intelligence-driven sexual enhancement programs, and virtual reality-based intimacy technology raise serious ethical concerns about safety and long-term implications (Shaw *et al.*, 2023). Africa's utilization of creative ideas calls for health education initiatives to provide scientifically verified technological advances top priority while carefully evaluating the hazards of unbridled digital activities.

5. Modern methods for extension of sexual life

Numerous African nations grapple with sexual health issues, sparking both instinctive and deliberate efforts to enhance reproductive capabilities. Traditional methods have endured, whilst advancements in medical research, herbal treatments, and technological innovations have revolutionized sexual healthcare practices. These methods include hormone treatments, pharmaceutical interventions, herbal supplement use, and digital health solutions. While promising, certain improvements have side effects, dependency, and misleading potential (Friedman et al., 2023). The quest for modern treatments, organic and synthetic dietary supplements, and technological advances developments emphasizes the advantages and the risks of SL.

5.1. Present methods

As phosphodiesterase type 5 (PDE5) inhibitors, sildenafil and tadalafil are utilised in contemporary medicine to enhance sexual performance and longevity. Despite the potential for cardiovascular complications, prolonged

erections, and psychological reliance associated with these drugs, their capacity to enhance blood flow has a beneficial effect on erectile function (Huang and Lie 2013; Leslie and Sooriyamoorthy, 2024). Hormone replacement therapy (HRT) designed to lower testosterone levels is common among older men. Hormone replacement therapy (HRT) improves libido and vitality, although it carries risks including prostate enlargement and cardiovascular complications (Yabluchanskiy and Tsitouras, 2019). This underscores the significance of medical oversight. Lifestyle modifications, behavioural therapy, and pharmacological interventions can improve sexual longevity through non-invasive methods. Pelvic floor exercises, mindfulness, and psychotherapy improve sexual satisfaction and function (Naji *et al.*, 2024). Many African societies prefer rapid solutions, resulting in a considerable dependence on synthetic, nonprescription medications. This behaviour fosters drug addiction and substance misuse.

5.2. Herbs, drugs, supplements

Modern medicine makes use of sildenafil and tadalafil as phosphodiesterase type 5 (PDE5) inhibitors to improve sexual performance and lifetime. Though their capacity to increase blood flow has a positive impact on erectile function, despite the possibility for cardiovascular consequences, extended erections, and psychological reliance related with these medicines (Huang and Lie 2013; Leslie and Sooriyamoorthy, 2024). An increasing number of herbal treatments, nutritional supplements, and nutraceuticals claim to promote sexual health. L-arginine, zinc, and ginseng boost sexual function naturally (Huang and Lie, 2013). While some supplements are scientifically sound, lack of oversight in African markets raises concerns about contamination and potency. The unregulated rise of these medications requires additional regulation to tackle health risks. An increasing number of herbal treatments, nutritional supplements, and nutraceuticals claim to promote sexual health. L-arginine, zinc, and ginseng boost sexual function naturally (Balasubramanian et al., 2019). While some supplements are scientifically sound, lack of oversight in African markets raises concerns about contamination and potency.

5.3. Technology and sexual health analysis

The integration of wearable devices and digital health platforms in monitoring and improving sexual performance has profoundly transformed the landscape of sexual health. Among the biomedical engineering advancements that significantly expand access to sexual health education, medical care, and therapies aimed at enhancing erectile function are penile implants and PRP injections (Palmer *et al.*, 2020; Israeli *et al.*, 2022). Telemedicine and mobile apps developments could offer solutions, marketing of sexual health technologies has misled people and taken advantage of them. Rising unproven internet treatments, artificial intelligence-driven sexual enhancement programs, and virtual reality intimacy technologies raise ethical questions regarding their safety and long-term consequences (Shank *et al.*, 2025). Adoption of new ways by Africa calls for public health campaigns to give scientifically verified technologies top priority while carefully balancing the hazards of unbridled digital interventions.

6. Hidden risks: Health hazards and their effects

The quest of SL in Africa consists in a range of techniques meant to improve sexual performance and enjoyment by means of sexual engagement. While some systems are based on the knowledge that has been handed down through centuries, others make advantage of contemporary materials and techniques. Often including unexpected health hazards and consequences, these behaviours can negatively affect people's well-being.

6.1. Physical and psychological consequences of SL techniques

Using methods of sexual enhancement could lead to really major bodily issues. Among several sub-Saharan African countries, Ghana included, the spread of uncontrolled sexual enhancement pills has become a major public health concern. Using these uncontrolled aphrodisiacs could have bad effects like headaches, major responses needing medical attention, and many other health problems. One study found that 20.7% of individuals had adverse effects; headaches were the most often occurring; 3.9% of cases needed hospitalization (Amaning-Danquah et al., 2011). These pursuits could affect mental as much as physical health. Using sexual enhancement pills has been linked to psychological dependency (Campbell et al., 2022). Factors that influence mental health of university and college students (Malhi and Bell, 2022), in which individuals feel they cannot reach sexual performance without this help. This reliance could cause psychological problems such worry

and depression, therefore aggravating the general condition of the person (Acute Care Nurse Practitioner-ACNP, 2021).

6.2. Unregulated substance risks

Using uncontrolled sexual enhancement drugs seriously increases your health risk. Many of these goods include hidden or dangerous components, which might cause very bad effects. For example, several over-the-counter sexual enhancement products have been found to include sildenafil, the active component in Viagra, in far higher levels than either legally recommended, or unknown levels of additional active components (Ahmed *et al.*, 2016). Such adulterated drugs could have major negative effects on health including myocardial infarction, cerebrovascular accidents causing stroke, sudden cardiac death, and extended erections perhaps leading to impotence (Leslie and Sooriyamoorthy, 2024).

6.3. Emotional and psychological consequences

The quest of sexual vitality via different approaches could compromise mental and emotional stability. Particularly anabolic steroids, some specific drugs can induce mood changes, irritability, aggressiveness, and depression. Reviewed were those prominent psychiatric symptoms—aggression and violence, mania, and less often psychosis and suicidal tendencies—that have been associated to steroid usage (Piacentino *et al.*, 2015; Pope *et al.*, 2021). Moreover, depending too much on sexual enhancing products can lead to lower self-worth and increased anxiety. People may become depending on these drugs when they think they cannot engage in sexual activity without them, therefore aggravating already existing mental health problems. This dependence can strain personal relationships, cause emotional upheaval and social isolation (Lettieri *et al.*, 1980).

7. Social and moral effects

African SL is heavily influenced by culture, society, and finances. Even if it inspires creativity, this pursuit poses ethical and social issues. Without proper control, natural medicines, pharmaceuticals, and experimental treatments can cause health problems (Wang et al., 2023). According to Jones and White's research from 2020, the expectations that society has for men regarding their sexual abilities can result in psychological anguish and have the potential to lead to exploitation.

7.1. SL ethics advocate

The promotion of SL could generate questions about medical safety, personal values including honesty and conflict of interest. The search for SL and vitality is linked to unregulated medicines with possibly harmful elements (Preuss *et al.*, 2023). Ethics and poor-quality control beg issues about wise decisions and client protection. Medicalising sexual lifespan compromises patient welfare above profit, so aggravating ethical problems. Another moral question is profiteering from ancestral traditions without helping indigenous people. Development of ethical sexual health first has to provide patient safety, informed permission, and fair benefit-sharing. Sexual lifetime extension runs more danger without these restrictions.

7.2. Social pressures and musical performance search

Because of cultural pressures on masculinity and virility, people pay a lot for sexual enhancement (Khumalo et al., 2021). Pressure to satisfy these criteria could lead to anxiety, low self-esteem, and drug addiction. The media and popular culture support these stories; hence it becomes difficult to question social mores. The stigma connected with sexual inadequacy aggravates the problem by deterring honest talks about safe and healthy sexual behaviour. Many African nations mock men who fall short, and women are pressured to employ dangerous augmentation technologies to impress their spouses. These social expectations require public education and legal actions to promote a more holistic sexual health view.

7.3. Sexual health methodologies and gender equality

Gender equality has historically been perceived as a women's problem, highlighting the inequalities and prejudice that persist between men and women (UNFPA, 2023). Investigating the causal relationship between health services and gender equality is crucial for policy development and scholarly research (Wang and

Torbica, 2024). Women often need to adapt to reform initiatives that prioritize male perspectives, frequently at the expense of their own well-being (Word Health Organisation, 2010). The prioritization of male sexual health over female sexual health perpetuates gender inequality (Tesha *et al.*, 2023). Women demonstrate heightened susceptibility to STIs and reproductive health issues due to risky sexual enhancement practices (Ngoc Do *et al.*, 2020). Ethical models must promote gender-inclusive policies that emphasize reciprocal well-being to address these disparities. Access to healthcare and knowledge empowers women to make arguments for equitable sexual wellness practices free from gender bias.

8. Public health/policy issues

African SL researchers have developed traditional therapies, novel medications, unregulated supplements, and pharmacological discoveries. These approaches pose serious health risks because to misinformation, risky consumption, and drug interactions (Kamatenesi-Mugisha and Oryem-Origa 2005). These concerns require public health programs and comprehensive policies. Governments and medical organizations are responsible for the safety, regulation, and education of sexual enhancement medications, as uncontrolled behaviours bring hidden risks that necessitate organized schemes. To improve sexual healthcare in primary care settings, Ramlachan and Naidoo (2024) suggest developing a safe and non-judgmental setting for historytaking.

8.1. The roles of government and health organizations

Manufacture and distribution of sexual enhancement drugs must be under regulation by governments and public health agencies. Traditional and synthetic enhancers without regulation can cause cardiovascular issues and reliance (Shaito *et al.*, 2020). Reducing hazardous material distribution calls for more control, licencing, and quality assurance. To improve consumer safety and access to medically approved pharmaceuticals, national health institutions must follow global best practises (WHO, 2019). Sexual health agencies should prioritise research and development for safer options and effective regulation. For modern society, the scientific validation of indigenous pharmaceuticals using a multidisciplinary approach is important as it promotes the sustainability of local healthcare practices and helps to validate local policies (Leonti and Casu, 2013). Policies must encourage doctors and patients to discuss sexual health to reduce stigma. Pharmaceutical corporations, local leaders, and others help governments create viable public health and consumer autonomy laws.

8.2. Safety guidelines and interventions

Sexual lifetime intervention dangers must be reduced by strong laws. Sexual enhancement drug manufacturing, advertising, and distribution must be closely regulated by national drug agencies. Unregulated products with secret prescriptions often cause overdose and injury. Testing and standards ensure safe and effective medications. Increased sanctions for illegal marketing and distribution should curb counterfeiting (WHO, 2020). Health care for everyone must prioritize reducing harm, including validated conventional therapies. Community-based programs that monitor herbal and pharmaceutical sexual enhancer use improve safer behaviours by affecting Promotion of medicinal alternatives and prohibition of harmful, illegal medications will improve sexual health. Government and non-governmental organization cooperation reduces dependency on high-risk alternatives by making safer medical treatments affordable (Rajabi *et al.*, 2021).

8.3 Educational and awareness programmes

Educational activities are vital in helping people distinguish fact from fiction, especially when it comes to sexual enhancement. They guide individuals toward responsible, informed choices. Unfortunately, many internet platforms and casual conversations often spread false information, making exaggerated claims and offering unrealistic promises to those looking to improve their sexual performance (Simon and Daneback, 2013). Government-sponsored campaigns must give accurate, evidence-based information about sexual lifespan risks and benefits. Healthcare personnel will be trained to have honest talks with patients, improving decision-making and safety (Quick, 2022). Awareness efforts must reach urban and rural people through mass media, community workshops, and the internet. Partnerships with religious groups, traditional healers, and powerful people improve these projects by utilizing culturally relevant themes (Read *et al.*, 2023). Continuous impartation of knowledge will lower health hazards and encourage sexual improvement ethics in African societies.

9. Future prospects and research gaps

More research into important areas that aren't getting enough attention right now is necessary for SL research in Africa. Regarding the long-term psychological and physiological impacts of synthetic and conventional enhancers as well as their biochemical pathways, interactions, and consequences for reproductive health, significant knowledge gaps remain. Analysis of these areas might produce evidence-based recommendations for better use. Harm-reduction strategies, such as public awareness campaigns, legislative frameworks, and the incorporation of traditional medicine into official healthcare systems, hold equal significance. Crosscultural research can clarify the universality of sexual enhancement behaviours and their many health effects by comparing African habits with global trends. Dealing with these information gaps will help to guide public health initiatives and policy decisions, consequently ensuring that progress in SL does not put at risk human well-being.

10. Conclusion

The African search of SL has major hidden hazards even though it mixes instinct, history, and technology. Researchers claim that many people use traditional remedies, medications, and even illegal drugs to improve performance; yet, the lack of scientific validation and control causes great health risks. The immediate benefits often seem more appealing, but they tend to overshadow the long-term negative effects, such as toxicity, dependency, and reproductive challenges, which are frequently downplayed in favor of promoting virility. A multifaceted approach prioritizing sexual health and safety is essential for addressing these issues. Contemporary healthcare reduces risks via education, legislation, and conventional medicine, thus maintaining cultural practices. Sustainable methods support scientific alternatives and ethical consumerism as well as open conversation about ageing, masculinity, and well-being. The African concept of SL must integrate contemporary science with traditional practices to ensure that performance enhancement does not jeopardize health. To improve the safety of sexual vitality augmentation, cross-disciplinary cooperation, public awareness, and ethical issues should be given highest relevance.

References

- Achen, S., Atekyereza, P. and Rwabukwali, C.B. (2021). The role of culture in influencing sexual and reproductive health of pastoral adolescent girls in Karamoja sub-region in Uganda. *Pastoralism*, 11: 25.doi: https://doi.org/10.1186/s13570-020-00188-9
- Acute Care Nurse Practitioner ACNP 60th Annual Meeting: Poster Abstracts P1-P275. (2021). *Neuropsychopharmacology: Official Publication of the American College of Neuropsychopharmacology*, 46(Suppl) 1: 72–217. doi: https://doi.org/10.1038/s41386-021-01236-7
- Ahmed, M., Kumari, S., Manali, P., Sonje, S. and Malik, M. (2016). Safety and quality concerns regarding overthe-counter sexual enhancement products sold in the USA market pose a major health risk. *Journal of Addiction Research & Therapy*, 7(5): 299. doi: https://doi.org/10.4172/2155-6105.1000299
- Al-Madhagi, H. and Tarabishi, A. (2024). Nutritional aphrodisiacs: Biochemistry and pharmacology. *Current Research in Food Science*, 9, 100783. doi: https://doi.org/10.1016/j.crfs.2024.100783
- Amaning-Danquah, C., Koffuor, G., Anto, B. and Nimako, K.A. (2011). The indiscriminate use of sex-enhancing products among Ghanaians: Prevalence and potential risk. *Advances in Applied Science Research*, 2(4): 350-359.
- Balasubramanian, A., Thirumavalavan, N., Srivatsav, A., Yu, J., Hotaling, J.M., Lipshultz, L.I. and Pastuszak, A.W. (2019). An analysis of popular online erectile dysfunction supplements. *The Journal of Sexual Medicine*, 16(6): 843-852. doi: https://doi.org/10.1016/j.jsxm.2019.03.269
- Beerepoot, S., Luesken, S., Huisman, M. and Deeg, D.J.H. (2022). Enjoyment of sexuality and longevity in late midlife and older adults: The longitudinal ageing study Amsterdam. *Journal of Applied Gerontology*, 41(4): 07334648221078852. doi: https://doi.org/10.1177/07334648221078852
- Brookmeyer, K.A., Haderxhanaj, L.T., Hogben, M. and Leichliter, J. (2019). Sexual risk behaviors and STDs among persons who inject drugs: A national study. *Preventive Medicine*, 126, 105779. doi: https://doi.org/10.1016/j.ypmed.2019.105779
- Brunetti, P., Lo Faro, A.F., Tini, A., Busardò, F.P. and Carlier, J. (2020). Pharmacology of herbal sexual enhancers: A review of psychiatric and neurological adverse effects. *Pharmaceuticals (Basel, Switzerland)*, 13(10): 309. doi: https://doi.org/10.3390/ph13100309

- Campbell, F., Blank, L., Cantrell, A., Baxter, S., Blackmore, C. Dixon, J. and Goyder, E. (2022). Factors that influence mental health of university and college students in the UK: a systematic review. *BMC Public Health*, 22(1): 1778. doi: https://doi.org/10.1186/s12889-022-13943-x
- Dhaliwal, A. and Gupta, M. (2023). PDE5 inhibitors. In *StatPearls*. StatPearls Publishing. Retrieved from https://www.ncbi.nlm.nih.gov/books/NBK549843/
- Drummond, P., Mizan, A., Burgoyne, A. and Wright, B. (2006). A survey of sexual health knowledge in migrants from West Africa. Murdoch University, Western Australia. www.public.health.wa.gov.au
- Edwards, S., Rocha, I., Williamson, E. and Heinrich, M. (2015). Horny goat weed. In *Encyclopedia of Complementary Medicine*, 403-408. Wiley. doi: https://doi.org/10.1002/9781118543436.ch58.
- Ekor, M. (2014). The growing use of herbal medicines: issues relating to adverse reactions and challenges in monitoring safety. *Frontiers in Pharmacology*, 4: 177. doi: https://doi.org/10.3389/fphar.2013.00177
- Friedman, J., Sheeder, J., Lazorwitz, A. and Polotsky, A.J. (2023). Herbal supplement use among reproductive-aged women in an academic infertility practice. *F&S Reports*, 4(1), 104-111. doi: https://doi.org/10.1016/j.xfre.2022.12.001
- Ghadigaonkar, D.S. and Murthy, P. (2019). Sexual dysfunction in persons with substance use disorders. *Journal of Psychosexual Health*. doi: https://doi.org/10.1177/2631831819849365
- Homsi, C., Bø, K., Catai, C., Brito, L., Driusso, P. and Tennfjord, M. (2024). Pelvic floor muscle training as treatment for female sexual dysfunction: A systematic review and meta-analysis. *American Journal of Obstetrics and Gynecology*, 231: Article 10.1016/j.ajog.2024.01.001. doi: https://doi.org/10.1016/j.ajog.2024.01.001
- Hops, H., Ozechowski, T.J., Waldron, H.B., Davis, B., Turner, C.W., Brody, J.L. and Barrera, M. (2011). Adolescent health-risk sexual behaviors: effects of a drug abuse intervention. *AIDS and Behavior*, 15(8): 1664-1676. doi: https://doi.org/10.1007/s10461-011-0019-7
- Huang, S.A. and Lie, J.D. (2013). Phosphodiesterase-5 (PDE5) Inhibitors In the Management of Erectile Dysfunction. *P & T : A Peer-reviewed Journal for Formulary Management*, 38(7): 407-419.
- Israeli, J.M., Lokeshwar, S.D., Efimenko, I.V., Masterson, T.A. and Ramasamy, R. (2022). The potential of plateletrich plasma injections and stem cell therapy for penile rejuvenation. *International Journal of Impotence Research*, 34(4): 375-382. doi: https://doi.org/10.1038/s41443-021-00482-z.
- Kamatenesi-Mugisha, M. and Oryem-Origa, H. (2005). Traditional herbal remedies used in the management of sexual impotence and erectile dysfunction in western Uganda. *African Health Sciences*, 5(1), 40-49.
- Khumalo, S., Mabaso, M., Makusha, T. and Taylor, M. (2021). Intersections Between Masculinities and Sexual Behaviors Among Young Men at the University of KwaZulu-Natal, South Africa. *Sage Open*, 11(3). doi: https://doi.org/10.1177/21582440211040114
- Khumalo, S., Taylor, M., Makusha, T., *et al.* (2020). Intersectionality of cultural norms and sexual behaviours: A qualitative study of young Black male students at a university in KwaZulu-Natal, South Africa. *Reproductive Health*, 17(1): 188. doi: https://doi.org/10.1186/s12978-020-01041-3
- Kishor, S. and Bradley, S.E.K. (2012). Women's and men's experience of spousal violence in two African countries: Does gender matter? (DHS Analytical Studies No. 27). United States Agency for International Development (USAID). ICF International. https://dhsprogram.com/publications/pdf/AS27/AS27.pdf
- Krychman, M.L. and Eilber, K.S. (2024). Sexual Longevity: A Practical Guide for a Lifetime of Sexual Pleasure (Paperback). Amazon. https://www.amazon.com/Sexual-Longevity-Practical-Lifetime-Pleasure/dp/B0D8ZVRRWS.
- Leisegang, K. and Finelli, R. (2021). Alternative medicine and herbal remedies in the treatment of erectile dysfunction: A systematic review. *Andrologia*, 53(6), 323-339. doi: https://doi.org/10.1080/2090598X.2021.1926753
- Leonti, M. and Casu, L. (2013). Traditional medicines and globalization: current and future perspectives in ethnopharmacology. *Frontiers in Pharmacology*, 4: 92. doi: https://doi.org/10.3389/fphar.2013.00092
- Leslie, S.W. and Sooriyamoorthy, T. (2024). Erectile Dysfunction. In StatPearls [Internet]. Treasure Island (FL): Updated 2024 Jan 9, StatPearls Publishing; 2025 Jan. Available from: https://www.ncbi.nlm.nih.gov/books/NBK562253/
- Lettieri, D.J., Sayers, M. and Pearson, H.W. (Eds.). (1980). *Theories on drug abuse: Selected contemporary perspectives* (NIDA Research Monograph No. 30). U.S. Department of Health and Human Services, Public Health

- Service, Alcohol, Drug Abuse, and Mental Health Administration, National Institute on Drug Abuse, Division of Research
- Malhi, G.S. and Bell, E. (2022). Questions in psychiatry (QuiP): Psychological basis for sexual dysfunction in psychiatry. *Bipolar Disorders*, 24(8): 830-833. doi: https://doi.org/10.1111/bdi.13273
- Melendez-Torres, G.J. and Bourne, A. (2016). Illicit drug use and its association with sexual risk behaviour among MSM: more questions than answers?. *Current Opinion in Infectious Diseases*, 29(1): 58–63. doi: https://doi.org/10.1097/QCO.000000000000000234
- Moore, E.V., Ddaaki, W., Hirsch, J.S., Chang, L., Nalugoda, F. and Santelli, J.S. (2022). Sex is supposed to be naturally more pleasurable: Healers as providers of holistic sexual and reproductive healthcare in Uganda. *Social Science & Medicine* (1982), 296: 114756. doi: https://doi.org/10.1016/j.socscimed.2022.114756
- Moreira, D. de L., Teixeira, S.S., Monteiro, M.H.D., De-Oliveira, A.C.A.X. and Paumgartten, F.J.R. (2014). Traditional use and safety of herbal medicines. *Revista Brasileira de Farmacognosia*, 24(2): 248-257. doi: https://doi.org/10.1016/j.bjp.2014.03.006
- Mutombo, P.N., Kasilo, O.M. J., James, P.B., Wardle, J., Kunle, O., Katerere, D., Wambebe, C., Matsabisa, M. G., Rahmatullah, M., Nikiema, J.B., Mukankubito, I., Sheridan, R., Sanogo, R., Nissapatorn, V., Sivakorn, C., Tripathy, S., Goyal, R. and Dhobi, M. (2023). Experiences and challenges of African traditional medicine: lessons from COVID-19 pandemic. *BMJ Global Health*, 8(8), e010813. doi: https://doi.org/10.1136/bmjgh-2022-010813
- Naji, M., Hoseinnezhad, S.Z., Heshmat, F. and Asgharipour, N. (2024). Investigating effective psychological interventions in pregnant women's sexual satisfaction: A systematic review. *Journal of Education and Health Promotion*, 13: 33. doi: https://doi.org/10.4103/jehp.jehp_103_23
- Ngoc Do, H., Ngoc Nguyen, D., Quynh Thi Nguyen, H., Tuan Nguyen, A., Duy Nguyen, H., Phuong Bui, T., Bich Thi Vu, T., Thanh Le, K., Tuan Nguyen, D., Tat Nguyen, C., Gia Vu, L., Thu Vu, G., Xuan Tran, B., Latkin, C.A., Ho, R.C.M. and Ho, C.S.H. (2020). Patterns of Risky Sexual Behaviors and Associated Factors among Youths and Adolescents in Vietnam. *International Journal of Environmental Research and Public Health*, 17(6): 1903. doi: https://doi.org/10.3390/ijerph17061903
- Okechi, O.S. (2018). The indigenous concept of sexuality in African tradition and globalization. *Global Journal of Reproductive Medicine*, 6(1). doi: https://doi.org/10.19080/gjorm.2018.06.555676
- Palmer, M.J., Henschke, N., Villanueva, G., Maayan, N., Bergman, H., Glenton, C., Lewin, S., Fønhus, M.S., Tamrat, T., Mehl, G.L. and Free, C. (2020). Targeted client communication via mobile devices for improving sexual and reproductive health. *The Cochrane Database of Systematic Reviews*, 8(8): CD013680. doi: https://doi.org/10.1002/14651858.CD013680
- Payne, K.S., Mazur, D.J., Hotaling, J.M. and Pastuszak, A.W. (2019). Cannabis and Male Fertility: A Systematic Review. *The Journal of Urology*, 202(4), 674–681. doi: https://doi.org/10.1097/JU.00000000000000248
- Piacentino, D., Kotzalidis, G.D., Del Casale, A., Aromatario, M.R., Pomara, C., Girardi, P. and Sani, G. (2015). Anabolic-androgenic steroid use and psychopathology in athletes. A systematic review. *Current Neuropharmacology*, 13(1), 101–121. doi: https://doi.org/10.2174/1570159X13666141210222725
- Pope, H.G., Jr, Kanayama, G., Hudson, J.I. and Kaufman, M.J. (2021). Review Article: Anabolic-Androgenic Steroids, Violence, and Crime: Two Cases and Literature Review. *The American Journal on Addictions*, 30(5): 423-432. doi: https://doi.org/10.1111/ajad.13157
- Preuss, C.V., Kalava, A. and King, K.C. (2023). Prescription of Controlled Substances: Benefits and Risks. [Updated 2023 Apr 29]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025 Jan. Available from: https://www.ncbi.nlm.nih.gov/books/NBK537318/
- Quick, O. (2022). Duties of Candour in healthcare: The truth, the whole truth, and nothing but the truth?. *Medical Law Review*, 30(2), 324-347. doi: https://doi.org/10.1093/medlaw/fwac004
- Rajabi, M., Ebrahimi, P. and Aryankhesal, A. (2021). Collaboration between the government and nongovernmental organizations in providing health-care services: A systematic review of challenges. *Journal of Education and Health Promotion*, 10, 242. doi: https://doi.org/10.4103/jehp.jehp_1312_20
- Ramlachan, P. and Naidoo, K. (2024). Enhancing sexual health in primary care: Guidance for practitioners. *South African Family Practice: Official Journal of the South African Academy of Family Practice/Primary Care*, 66(1), e1–e5. doi: https://doi.org/10.4102/safp.v66i1.5822

- Read, U., Jilka, S. and Singh, S. (2023). Collaborating with traditional and faith healers in mental health: A public health approach. *World Social Psychiatry*, *5*, 144-148. doi: https://doi.org/10.4103/wsp.wsp_28_23
- Ryan, M. (2021). Darwin, sexual selection, and the brain. *Proceedings of the National Academy of Sciences*, 118, e2008194118. doi: https://doi.org/10.1073/pnas.2008194118
- Saheed, R.O. (2023). Globalisation and the emerging sexual trends in Africa. *ABUAD Journal of Social and Management Sciences (AJSMS)*, 4(1): 75-91. doi: https://doi.org/10.53982/ajsms.2023.0401.05-j
- Seshadri K. G. (2016). The neuroendocrinology of love. *Indian Journal of Endocrinology And Metabolism*, 20(4), 558-563. doi: https://doi.org/10.4103/2230-8210.183479
- Shaito, A., Thuan, D.T.B., Phu, H.T., Nguyen, T.H.D., Hasan, H., Halabi, S., Abdelhady, S., Nasrallah, G.K., Eid, A.H. and Pintus, G. (2020). Herbal medicine for cardiovascular diseases: Efficacy, mechanisms, and safety. *Frontiers in pParmacology*, 11: 422. doi: https://doi.org/10.3389/fphar.2020.00422
- Sharma, R., Biedenharn, K.R., Fedor, J.M. and Agarwal, A. (2013). Lifestyle factors and reproductive health: taking control of your fertility. *Reproductive Biology and Endocrinology: RB&E*, 11: 66. doi: https://doi.org/10.1186/1477-7827-11-66
- Shaw, S., Oswin, S., Xi, Y., Calandriello, F. and Fulmer, R. (2023). Artificial intelligence, virtual reality, and augmented reality in counseling: Distinctions, evidence, and research considerations. *Journal of Technology in Counselor Education and Supervision*, 4, Article 1095. doi: https://doi.org/10.61888/2692-4129.1095
- Shank, D.B., Koike, M. and Loughnan, S. (2025). Artificial intimacy: Ethical issues of AI romance. *Trends in Cognitive Sciences*, 29(6), 499-501. https://doi.org/10.1016/j.tics.2025.02.007.
- Simon, L. and Daneback, K. (2013). Adolescents' use of the internet for sex education: A thematic and critical review of the literature. *International Journal of Sexual Health*, 25(4): 305-319. doi: https://doi.org/10.1080/19317611.2013.823899
- Society of General Internal Medicine. (2023). Abstract__Annual Meeting. (2023). *Journal of General Internal Medicine*, 38(Suppl 2): 81-799. doi: https://doi.org/10.1007/s11606-023-08226-z
- Tesha, J., Fabian, A., Mkuwa, S. *et al.* (2023). The role of gender inequities in women's access to reproductive health services: a population-level study of Simiyu Region Tanzania. *BMC Public Health*, 23: 1111. doi: https://doi.org/10.1186/s12889-023-15839-w
- UNFPA. (2023). Gender-Transformative Approaches to Achieve Gender Equality and Sexual and Reproductive Health and Rights: Technical note. United Nations Population Fund. https://www.unfpa.org/sites/default/files/pub-pdf/UNFPA_GTA-2023.pdf
- Wang, Y. and Torbica, A. (2024). Investigating the relationship between health and gender equality: What role do maternal, reproductive, and sexual health services play?. *Health Policy*, 149: 105171. doi: https://doi.org/10.1016/j.healthpol.2024.105171
- Wang, H., Chen, Y., Wang, L., Liu, Q., Yang, S. and Wang, C. (2023). Advancing herbal medicine: enhancing product quality and safety through robust quality control practices. Frontiers in pharmacology, 14, 1265178. https://doi.org/10.3389/fphar.2023.1265178.
- WHO. (2010). *Gender, Women and Primary Health Care Renewal: A Discussion Paper*. WHO Library Cataloguing-in-Publication Data. https://iris.who.int/bitstream/handle/10665/44430/9789241564038_eng.pdf
- WHO. (2019). Road Map for Access to Medicines, Vaccines, and Other Health Products 2019–2023: Comprehensive Support for Access to Medicines, Vaccines, and Other Health Products. World Health Organization. https://iris.who.int/bitstream/handle/10665/330145/9789241517034-eng.pdf
- Yabluchanskiy, A. and Tsitouras, P.D. (2019). Is testosterone replacement therapy in older men effective and safe. *Drugs & Aging*, 36(11): 981-989. doi: https://doi.org/10.1007/s40266-019-00716-2

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