

## A Case Study of an ESR Woman with Non-Genital or Never-Ending Orgasms (NEOs) and Brain Orgasms, but with no PGAD

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### Abstract

Female orgasm is one of the unsolved phenomena in female physiology and psychology. Most of the women do not actually know their natural capacity in attaining powerful orgasms; male biases have, most of the time, shaped the norms of the sexual behavior of women in many cultures. 50 to 65% of women can attain multiple orgasms. In some of these women, orgasms can be prolonged and expanded. Expanded Sexual Response (ESR) is a recently defined phenomenon. ESR is defined as: “being able to attain long lasting and/or prolonged and/or multiple and/or sustained orgasms and/or status orgasmus that lasted longer and more intense than the classical orgasm patterns defined in the literature”. We have recently defined the case studies of five ESR women, as well as many other cases in the books and articles we have published. Approximately 10 - 15% of female population can develop ESR, by training. In this case report, we are, for the first time, defining a novel ESR Case (**Afros**) with non-genital orgasms, never-ending orgasms, brain orgasms and *status orgasmus*. **Afros** had the capacity of attaining various forms of female orgasms, such as clitoral orgasms, vaginal orgasms, vaginal-coital orgasms, G-Spot orgasms, non-genital orgasms, anal orgasms, nipple orgasms, ear-lobe orgasms, blended orgasms, and *status orgasmus*, as long as she was stimulated and aroused. She did not suffer from persistent genital arousal disorder (PGAD), since she could control her orgasms. The most intriguing perspective of **Afros** was that she experienced continuous orgasms (never-ending orgasms-NEOs) as long as she was stimulated, according to our observations and her descriptions; she could stay in the orgasmic state and consciousness for hours, even as long as for a day. Her most intriguing orgasms were recorded as 3-hour non-stop orgasms, with various forms of above orgasms, mostly *status orgasmus*. During another episode of 2 hours we recorded her having nearly more than 250 orgasms, some of which were combined with *status orgasmus*, that lasted from 15 minutes to 45 minutes. **Afros** is the *only* and *unique* woman who could maintain orgasmic physiological state and orgasmic consciousness incessantly in the medical literature recorded up to date. **Afros** also experienced mental orgasms as defined by Komisaruk., *et al.* and Sukel (2011).

**Keywords:** Expanded Orgasm; ESR; Expanded Sexual Response; Status Orgasmus; Blended Orgasm; Prolonged Orgasm; Limitless Orgasm; Never-Ending Orgasm; Vaginal Orgasm; Anal Orgasm; Brain Orgasm; Mental Orgasm; Altered States of Consciousness; ASC; NEO

### Introduction

Female orgasm is one of the most unexplained and intriguing phenomena in female physiology and psychology. Most of the women living on the globe do not actually know their natural capacity in attaining very powerful and intense orgasms. There are different and contradicting reports about the nature of female orgasms coming from different parts of the world. Some case studies have been reported

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in our other works [1-6]. We had given some case studies of ESR in some of our other reports [7]. One of the aims of this article and case study is to confirm an even further phenomenon: **Never Ending Orgasms (NEOs)**, as also described in the You Tube documentary entitled as "**Never Ending Orgasms**" [8]. This case study involves the following phenomena defined recently: ESR orgasms, expanded orgasms, never ending orgasms, DVZ (Deep Vaginal Erogenous Zones), blended orgasms and **status orgasmus**.

The medical literature and sex therapy have mostly been interested in and focused on the pathologies of human sexual behavior. No detailed research and investigation have ever been done on the limits and extents of human female's sexual potentials, such as Expanded Sexual Response (ESR) and Never-Ending Orgasms (NEO) which were recently defined phenomena on female sexuality. Cultures of Far East, and Dionysus Cult members in ancient Greece had investigated mostly the "pragmatic aspects" of the female sexuality starting from 6<sup>th</sup> century B.C. [1,4,5,9-14]. However, the ancient discoveries about female sexuality were forgotten for a long time, until the 20<sup>th</sup> Century. We have proven our hypothesis that "**A proportion of women have the capacity of attaining a series of multiple orgasms or prolonged orgasms incessantly, even sometimes they may become never-ending orgasms**" [4,5,15-17].

Actually, the main goal of sexology and sex therapy should be investigating the physiology, limits, extents of sexual behavior, not only focusing on the pathophysiology of the patients. All human population should be the subject of modern sex therapy, not only patients suffering from vaginismus, anorgasmia or lack of sexual desire in women and erectile dysfunction or premature ejaculation in men. Today, in the Western world the average coitus duration does not exceed 4 - 6 minutes [4,5,18-20], however the Taoist and Tantric literature describe cases of male erection and coitus lasting for hours [1,4-6,9-14,21]; is it acceptable to define normal coitus duration as 3 or 5 minutes? Tantric and Taoist love making techniques point out that, by training, this duration can be broadened and the pleasure from coitus, for both men and women, can be amplified.

Female orgasm and female 'peak experiences' have been well documented in the ancient historical literature of the Far East and India [9-14,22,23]. In Tantra and also in Taoist philosophy, for centuries, prolonging the sexual pleasure of the women was regarded as an essential approach; old Chinese Taoist prescription for male sexuality was also defending males to prolong intercourse for a couple of hours, while, according to ancient Chinese medicine men, losing semen was a kind of bad omen or losing the "*yang energy*". In Tantric rituals also, the women and particularly men were encouraged to prolong love making session, as well as the intercourse, without having an orgasm (especially for men). In Eastern writings, the essentials of making love were bringing the female partner to different levels of orgasm; women were allowed to reach to orgasm as much as they wanted, before the male ejaculated [9-14].

As measured by Masters and Johnson, the contraction duration of genital and pelvic area occurs at 0.8 second intervals [24]. Although males have a refractory period after one ejaculation, to become erect again, it is well documented that females have the capacity to continue having multiple climaxes if they are stimulated continuously and properly by the right partner [13,17-21,25-31]. As described by Masters and Johnson, some women can attain an orgasmic state which may last for 43 seconds, coined as **status orgasmus** [24].

A recent documentary at You Tube, entitled as: "**Never Ending Orgasms**" was investigating the mechanisms of ESR orgasms (see: <https://www.youtube.com/watch?v=fwDbxyppfEg>). According to the documentary, the scientists have started to investigate prolonged and multiple orgasms in USA, England and Germany in 2018. In the documentary there were interviews with the subject women who were attaining 50 to 100 orgasms in one hour; and tens of orgasms in a day, which are very unusual compared with the known data in the classical literature. The subject (we call her **Afros**) we are presenting here had the capacity of attaining 200 to 300 orgasms in a period of 2 hours, as well as reaching orgasms with non-genital stimulation, and also attaining many **status orgasmus** periods during a period of 2 hours, also experiencing *Brain Orgasms*.

The duration of expanded orgasms (EO) and ESR varied from woman to woman, lasting from several minutes to tens of minutes [13,16-21]. In the literature, the highest number of orgasms in a woman recorded by Dr. William Hartman and Marilyn Fithian was reported to be **134 per hour** [1], this subject was probably experiencing also a form of **status orgasmus**. During those cases no objective scientific data such as EEG (in 1950s) were recorded. Most of the fMRI and imaging studies are about single female orgasms; no EEG, PET,

fMRI, MR studies have been performed on the multiple orgasms or ESR phenomenon yet. As observed and recorded, we have seen the case of **Afros** as doubling the measures and parameters of Hartman-Fithian's subject, also attaining and/or *multiple prolonged orgasms* for at least 3 hours incessantly. Further neurological investigation is being made on **Afros**, the findings will be published in another paper.

**Non-genital orgasms:** Recently female orgasms of non-genital origin have been defined [32,33]. Whipple and Komisaruk, *et al.* also defined imagery orgasms, in which they documented cases of women who claim they can experience orgasms just by imagery - without any physical stimulation. Their bodily reactions of doubling of heart rate, blood pressure, pupil diameter and pain threshold, responses that were comparable in magnitude to when the same women induced orgasms by genital self-stimulation [33-35]. Otto and Paget defined zone orgasms, while they claimed that "*zone orgasm occurred when a sensitive spot or zone on the body of a person not usually used for erotic stimulation is stimulated to a peak*" [36,37]; they published the results of 216 people who filled out a questionnaire containing the zone orgasm item, 31 women and 8 men stated that they had experienced a zone orgasm, for instance experiencing an orgasm from having their neck licked, their fingers sucked or their thigh/groin area stroked [36]. Otto, Paget and Whipple and Komisaruk defined various different kinds of orgasms, such as mouth orgasms; hand and shoulder orgasms; breast and nipple orgasms; anal orgasms; birth orgasms; sleep and dream orgasms; phantom orgasms; hemiplegic orgasms in women; paraplegic orgasms in women; epileptic orgasms during seizures [33-37]. In most these orgasms, the undiscovered neurological connections, spino-thalamic pathways, innervation by nerves other than pudental nerve, such as hypogastric n. and vagus, were questioned.

**Mental orgasms:** Mental orgasms are defined in 2011 by Komisaruk, *et al.* [38,39] in mental orgasms it is hypothesized that some women's brain areas were activated simulating the actual orgasming patterns, when they were fantasizing or imagining about sexual activity.

**Never ending orgasms:** Never-Ending Orgasms were defined in a you tube documentary [8] (<https://www.youtube.com/watch?v=fwDbxyppfEg>). It was hypothesized that some women had the capacity of attaining orgasms continuously and incessantly, as long as they are stimulated and aroused.

**Persistent genital arousal disorder (PGAD):** First defined by Sandra Elibrum, in 2001, is a syndrome with symptom of pressure, pain, irritation, clitoral tingling, throbbing, vaginal congestion, vaginal contractions, and sometimes uncontrolled spontaneous orgasms [40,41]. Pressure, discomfort, pounding, pulsating, throbbing or engorgement may include the clitoris, labia, vagina, perineum, or the anus. The symptoms may result from sexual activity or from no identified stimulus, and are not relieved by orgasm except for cases where multiple orgasms over hours or days allow for relief; these spontaneous orgasms cannot be controlled by the person [40]. The symptoms can impede on home or work life. Women may feel embarrassment or shame, and avoid sexual relationships, because of the disorder. Stress can make the symptoms worse [42].

In some women who have developed ESR; Expanded Orgasms (EO), multiple orgasms and **status orgasmus** can vary in duration and in number of minor orgasms they contain in the train of orgasmic pattern. Lately, such prolonged orgasms and the methods how to attain them have been published in many books and articles [1-4,13-21,25-31,43-46]. Sayin defined **status orgasmus** as [1-7,18-21]:

*"Status orgasmus is the continuous form of blended orgasms and/or clitoral/vaginal orgasms that last for starting from 1 minute to 10-15 minutes (or more). During status orgasmus a continuous orgasmic state is experienced and very few women are believed to achieve status orgasmus state, e.g. less than 1% of the whole female population. Status orgasmus can be seen in vaginal and clitoral orgasms, however mostly it is seen as an expanded/extended form of blended orgasms, in which both clitoral and vaginal orgasm reflexes are triggered at the same time. Similar orgasmic states and full body orgasms are also defined in Tantric literature. The duration may change from woman to woman. Status orgasmus was first defined by Masters and Johnson as lasting for 43 seconds in a woman in 1966. Today it is estimated that status orgasmus continues for 1 to 2 minutes, while it may last for 10 to 15 minutes, a prolonged and extended orgasmic state which ends by a giant orgasm (Big-O) that gives a great relief and satisfaction at the end. In most of the status orgasmus experiences there is usually a refractory period of 10 to 15 minutes. The number of minor orgasms in a status orgasmus may exceed from 5 - 10 to 20 - 30 (some women*

claim that this quantity goes up to around 50). In **status orgasmus** it is thought that any combination of pudental, pelvic, hypogastric and vagal nerves mediate the triggering mechanism at the same time”.

As a novel phenomenon, “ESR orgasms and EO” seem to be different in many ways from the classical single orgasms, as defined by Masters and Johnson [1-7,13,16-22;24,43,46]:

- The duration and number of single orgasms in the orgasmic train may increase.
- The duration of the whole orgasmic experience may increase, such as lasting for tens of minutes.
- The intensity of the individual minor orgasms generally increases along with the length of the orgasmic train.
- The number of minor orgasms in the orgasmic train may be beyond the normal and average orgasmic pattern, such as exceeding 20 - 30 orgasms in tens of minutes.
- The pleasure taken and sexual relief is reported to be much more compared to single or a couple of multiple orgasms.
- Without a refractory period, a new orgasmic state commences after each orgasm, without passing to a resolution phase, while orgasmic consciousness state is maintained for a long time (e.g. from a couple of minutes to tens of minutes or hours)
- Although there may be some forms of ASCs in some single orgasms of some women, most of the ESR and EO orgasms are accompanied with ASCs, whereas time perception, space-time continuum may be altered deeply. We had reported 85 different states of mind in our former publications
- As reported by many ESR women, ESR orgasms seem to have anxiolytic, anti-depressive, euphoric, myo-relaxant, sedating, analgesic, acute and short acting hallucinogenic effects”.

Recently, some studies of orgasmic women also revealed a form of ASCs during orgasms [38]. There are increasing numbers of reports of females experiencing a form of ASC during prolonged and very intense orgasms, which form the novel concept of ESR. However, in those studies no classification of the sexual response was made to address a question such that, whether these women were experiencing an enhanced orgasm pattern and ESR, or not. Most of the questionnaire that investigated the ASCs during orgasms was prepared to quest an average orgasm or a single orgasm pattern of a women. In most of the surveys, vaginal-coital, blended orgasms and other erogenous zones of pleasure were not questioned.

### Case Study

**Afros**, was 45 years old medical doctor, living in İzmir-Turkey. Her ESR score was 138/150. For anonymity no other personal data will be revealed. A short description of her orgasms were as follows [47].

**Afros** had the capacity of attaining various forms of female orgasms, such as clitoral orgasms, vaginal orgasms, vaginal-coital orgasms, G-Spot orgasms, non-genital orgasms, anal orgasms, nipple orgasms, ear-lobe orgasms, blended orgasms, and **status orgasmus**. The most intriguing perspective of **Afros** was that she had continuous orgasms (never-ending orgasms) as long as she was stimulated. Most of her DVZ areas were sensitive and were able to be stimulated by means of vibrators, electricity (TENS) and manually (Table 1). Her most intriguing orgasms were recorded as 3-hour non-stop orgasms, with various forms of above orgasms, mostly **status orgasmus**. During another episode of 2 hours we recorded her having nearly more than 250 orgasms, some of which were combined with **status orgasmus**, which lasted from 15 minutes to 45 minutes. She also had the capacity of attaining short uterus-vaginal contractions and pre-orgasmic state by fantasizing and imagining erotic episodes, also during watching erotic soft-core erotic movies.

**Afros** had the capacity of attaining the following:

- Multiple clitoral, vaginal and blended orgasms.
- **Status orgasmus**
- Non-genital orgasms or orgasms triggered from non-genital areas such as nipples, lips, ear lobes, and anal intercourse etc. during some ASCs.
- Brain orgasms, reaching orgasmic level by means of only verbal stimuli and fantasizing, without any genital stimulation.

- Various forms of orgasms, through masturbation lasting for at least 3 hours incessantly.
- She was an ESR woman with an ESR Score of 138/150.
- Experiencing various forms of ASCs during prolonged orgasms and *status orgasmus*.

	G-Spot	A-Spot	O-Spot	Cervix	Clitoris	Nipple	Overall Total-DVZ	Anal	Brain Orgasms
Manual Stimulation	●●●●● ©	●●● ©	●●	●●●●●	●●●●● ©	●●●●● ©	●●●● ©	●●●●● ©	
Vibrator Stimulation	●●●●● ©	●●●●● ©	●●●●	●●●●● ©	●●●●● ©	●●●●	●●●●● ©	●●●●● ©	
TENS-Electrical Stimulation	●●●●● ©	●●●	●●●	●●●	●●●●● ©	●●	●●●	●●	
Orgasm	G-Spot Orgasms	DVZ Orgasms Vaginal Orgasms Coital Orgasms			Clitoral Orgasm	Nipple Orgasm	DVZ Orgasms	Anal Orgasms Anal-Coital Orgasms	Brain Orgasms

**Table 1:** The sensitiveness of erogenous zones and the type of orgasms Afros experienced.

●: Lightly Sensitive, lightly arousing; ●●: Sensitive, arousing; ●●●: Very sensitive, very arousing; ●●●●: Extremely sensitive ●●●●●: Top Sensitive ©: Inducing or attaining orgasms by the stimulation of this area

For vibrator stimulation, a bullet vibe, a rotating dildo-vibe (dolphine), a G-Spot or AFEZ stimulator (perfect-anchor) were used.

For TENS stimulation, different programs and frequencies of electrical stimulation of a TENS unit was used.

Further neurological examination and EEG, EMG, PET, MR scans, and fMRI recordings will be made for *Afros* to reveal the orgasm patterns in detail in a future article. This articles aims only to describe her basic orgasms patterns of *Afros*.

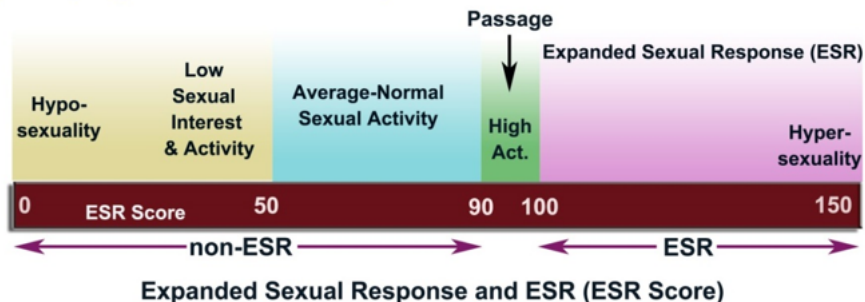
**What is ESR Score ?**

ESR Score Scale is a 25 item psychometric scale to measure the ESR and hypersexual activity in women designed by Dr. Ü.Sayin (2010, 2012)

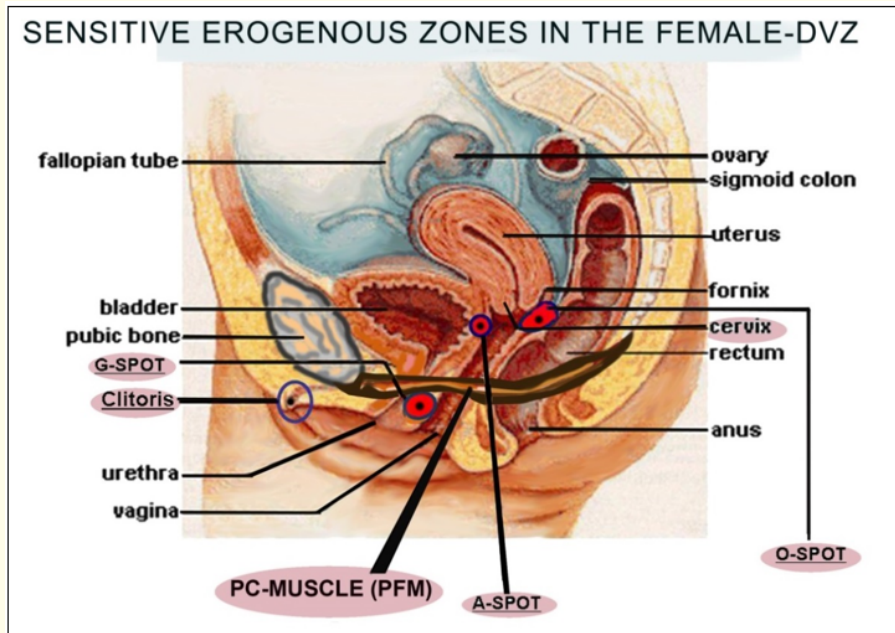
The women who get scores between 100-150 are accepted as ESR-women. Below 90 are non-ESR women. Between 90-100 is high sexual activity & hyper-sexual life style; they can easily turn into ESR by training.

**ESR Scale Measures:**

- |                        |                  |                          |
|------------------------|------------------|--------------------------|
| Libido                 | Arousal          | Blended Orgasms          |
| Masturbation Frequency | DVZ              | Orgasm Number            |
| Fantasy Frequency      | G-Spot           | Clitoral/Vaginal Orgasms |
| ASCs                   | G-Spot Orgasms   | Status Orgasmus          |
| Orgasm Capacity        | PC-Muscle Impact | PC Muscle strength       |



**Figure 1:** ESR score and ESR scale levels.



**Figure 2:** Deep vaginal erogenous zones (DVZs). Most of the deep erogenous zones of Afros were aroused by manual, vibration and electrical stimulation and triggered orgasm.

## Discussion and Conclusion

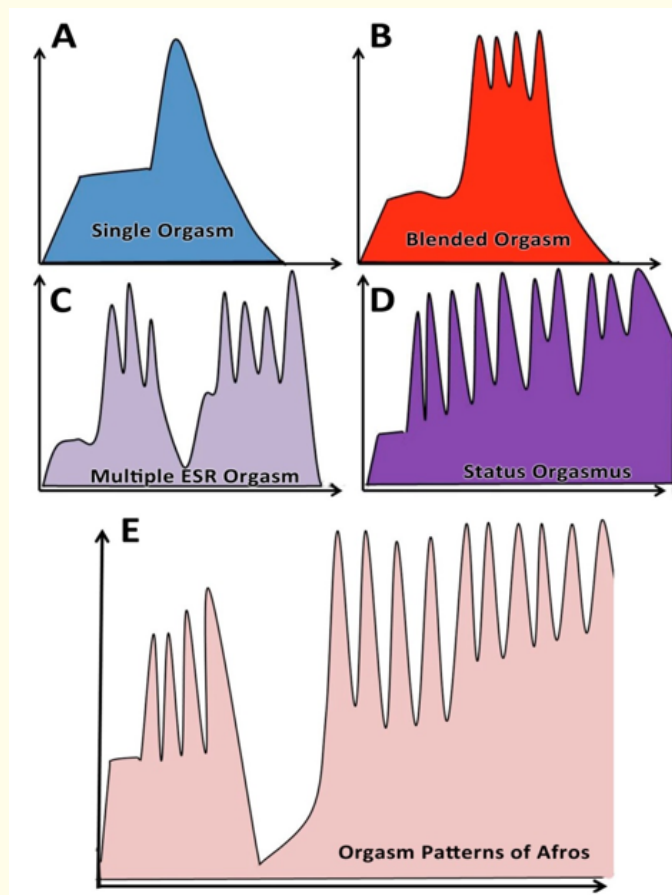
After looking at the above case of *Afros* we can infer a couple of conclusions:

- 1- Known and defined classical orgasm patterns in the medical literature does not show or reflect the extreme experiences in women.
- 2- There are many characteristics, styles and mechanisms to discover in female sexuality.
- 3- A phenomenon coined as ESR exists. It was formerly defined as: “being able to attain long lasting and/or prolonged and/or multiple and/or sustained orgasms and/or **status orgasmus** that lasted longer and more intense than the classical orgasm patterns defined in the literature” [1-3,18].
- 4- Sexual response in females can be developed; orgasms can be enhanced and amplified.
- 5- Ancient Taoist and Tantra techniques were a couple of means to develop ESR in women.
- 6- ESR can happen naturally or can be developed by training and it is not pathology, it should be distinguished from sex addiction.
- 7- Vaginal, anal, G-Spot, cervical, nipple and DVZ orgasms exist.
- 8- Non-genital and/or brain orgasms exist.

Although prolonged orgasms had been defined in ancient pagan, shaman, Tantric and Taoist cultures and literature many years ago, such an approach in the West has been accepted unmanageable and unimaginable for centuries. This understanding was partially a result of the biases of some of the monotheistic belief systems, which were highly anthropomorphic, autocratic and male dominated, as well as the biases of males who have investigated the female sexuality. In the Eastern cultures, however, females were regarded as a part of the Goddesses and the divine, while in the West, for centuries females were regarded as a means of the universal sin of the mankind, while anything related with sexuality was bad and evil to become shy of. Thus, the Westerners did not even bother to investigate the possible limits of the potential of females. Tantric culture temples are full statues and reliefs of Gods and Goddesses, having coitus of many different styles, even though the mainstream religions of Hinduism and Buddhism also regarded sexuality and pleasure something to be cautious of and to be stayed away.

Thus, in Europe, anything related with sexuality was regarded as filthy; and women were not allowed to get pleasure from sex and to attain an orgasm. Even by the end of 19<sup>th</sup> century, medical doctors and psychiatrists named “*female orgasm*” as “*hysterical paroxysm*” (a kind of epileptic seizure) (For details please watch the comedy film “*Hysteria*”). In the Tantric cultures, on the contrary, women were trained for both giving and getting pleasure from sexual activities. For instance, Tantric training of the PC-Muscles (PFM, pelvic floor muscles) and Chinese training of these muscles by using Ben-Waa balls since puberty were regarded essentials for good sexual health, as well as, sexual positions, meditation and concentration, breathing exercises, sensate focus exercises, sensual massage, prolonged rituals, prolonged coitus etc. [1-7,9-11,18-21,23,48-50].

The men and women in the West started to re-discover sexuality during the days of Western Sexual Revolution and the New Age Movement, after Second World War, when human sexuality was started to be investigated without any biases and with the objective and rational scientific methods. It was then, when Western mind realized that prolonged female orgasms and prolonged sexual activity could be possible, after learning it from the Eastern cultures. Old Chinese literature descending from 1<sup>st</sup> century B.C. defines female orgasm, as well as the Tantric writings in the 2<sup>nd</sup> and 3<sup>rd</sup> centuries, like the Kama Sutra, in the 6<sup>th</sup> - 7<sup>th</sup> century [1-5,8-14,16-17]. Female orgasm was first defined in the 19<sup>th</sup> and 20<sup>th</sup> centuries by some pioneers of the sexual research in the West [1-8,18-21,24,53-59].



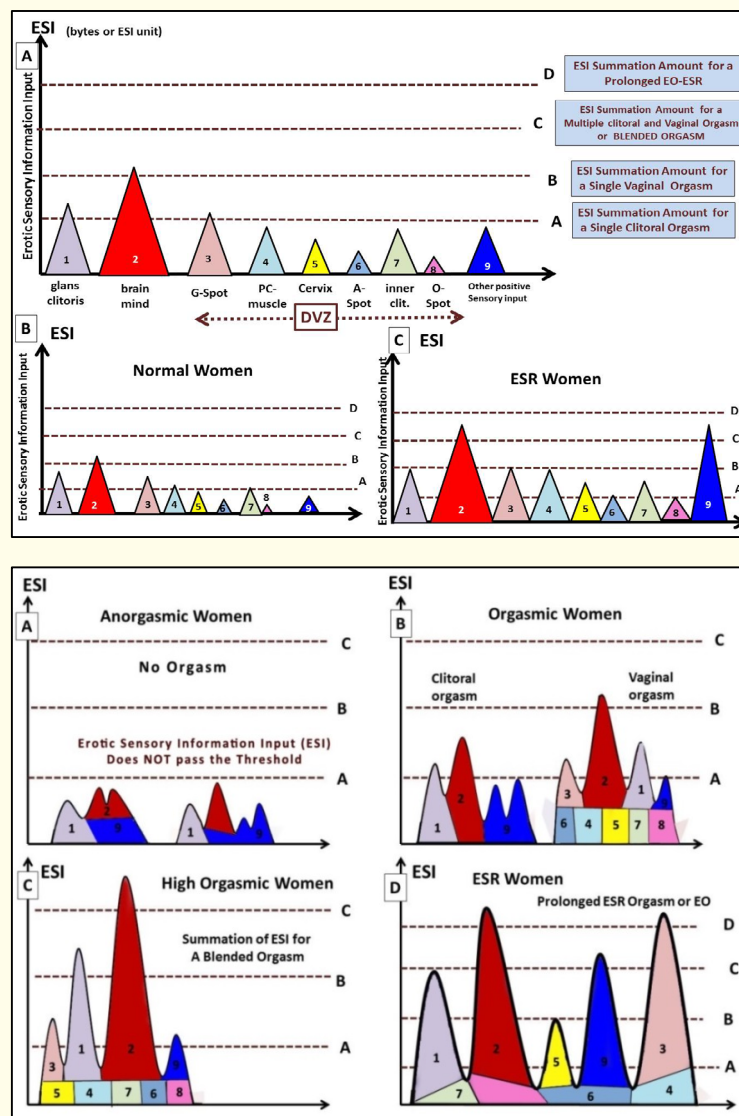
**Figure 3:** A) Classical female orgasm pattern, defined in the classical medical literature B) Multiple female orgasm pattern C) Blended female orgasm pattern D) Prolonged expanded orgasm or status orgasmus E) Representative depiction of the multiple orgasms and status orgasmus of Afros.

**Short explanation of prolonged ESR orgasms**

In females, there is more than one erogenous zone in the genitalia, and this differs from women to women. There are orgasm styles or types as the number of women in the world. Every female orgasm is different. Also, it has recently been proven that four nerves control female orgasm [1-7,15]. At figure 2 the possible arousal and erogenous areas (DVZs). In figure 4-6 the pathways and erotic sensory input

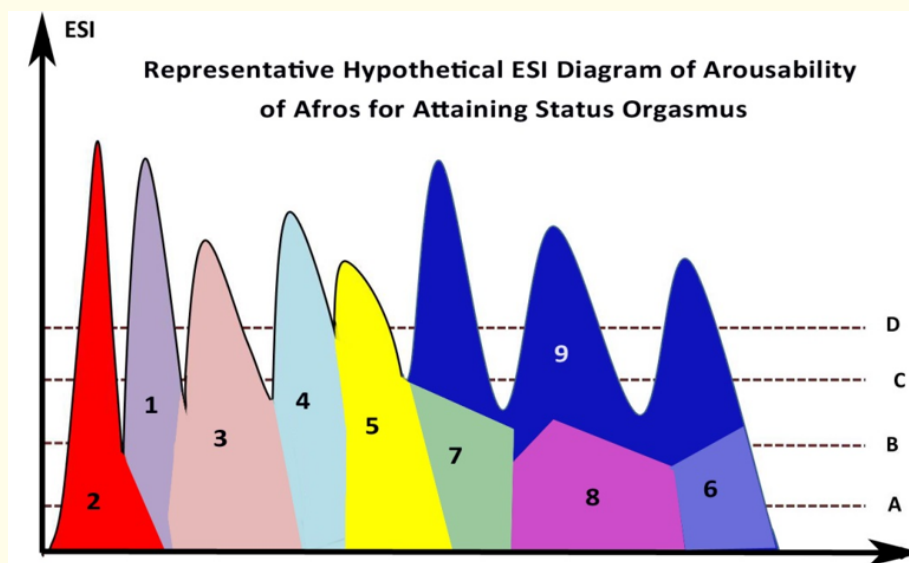
(ESI) that can trigger and orgasm are depicted. If there are 4 nerve pathways, there should be  $2^4 - 1 = 15$  (as much as the all possible subsets) orgasm types in women. Also, we have to add the oxytocinergic pathways to this formula. When more than one pathway triggers an orgasm, then the orgasm intensity is increased and orgasms are amplified.

Also, when we look at the female orgasm using “informatics theory” and take the components of what trigger and explode an orgasm in women, there are different erogenous zones in the female genitalia (DVZs). In ESR women these areas are aroused easier and their ESI (Erotic Sensory Information Input) are different than the normal women (or non-ESR women). Figure 4 summarizes the development of an orgasm or orgasms in different types of women and the impact of each erogenous zone. To trigger an orgasm there should a certain unit of ESI to overpass a certain threshold, namely an ESI threshold, in the brain. Different stimulants or ESI sources induce a vectoral summation of action potential or sensory input which builds up to a summation level to surpass the thresholds of different levels or types of orgasms.



**Figure 4:** The arousal zones in female genitals which may contribute to the building up of a clitoral, vaginal, blended or ESR orgasms. For every woman the amplitude of ESI and the arousability of these components are different; so the heights of colored triangles will be different, so will be the summation of these ESI factors. In ESR women ESI amplitude summation is the greatest. Those curves can be plotted for every woman by means of quantifying ESI. Here only some assumptions are made and a simple approach is shown to depict the components that induce a vaginal, blended or ESR prolonged orgasm. Top figure shows the ESI distributions in NESR and ESR women. Bottom figure shows the summation of ESI from different DVZ or locations.





**Figure 5:** The possible and hypothetical-extrapolated ESI summation and erotic input in Afros, who could attain status orgasmus and orgasmic consciousness for hours, during arousal and prolonged ESR orgasms.

In the case of **Afros**, the capacity of being aroused and attaining orgasms were very developed such that each ESI type and each different kind of orgasm ESI-threshold could be surpassed easily. She was aroused very easily and could attain prolonged *ESR orgasms* or **status orgasmus** or *NEO* for tens of minutes or hours. Most probably she had the capacity of releasing oxytocin, which triggers female orgasms, very fast and for a long time. This case **was not** persistent genital arousal syndrome (PGAD), since **Afros** could control her orgasms and her orgasms were not automated-pacemaker type of orgasms.

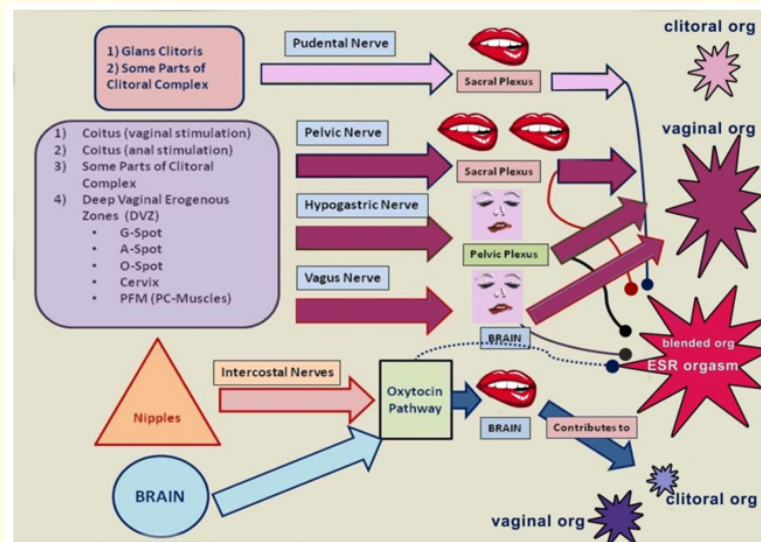
#### Female potentials which have not been discovered yet!

Pleasure and reaching to sexual climax is a learned phenomenon [18-21]. Sensuality, sexual brain, sexual body, sensitivity in the genitals and orgasm reflexes can also be developed and enhanced through exercises and training [26-30]. Reaching to enhanced orgasms and even ESR can be taught and trained (See figure 1). Today, ESR and **status orgasmus** can be experienced in less than 10% and less than 1% of the female population, respectively. In other words, all of the women who are trained in ESR and Tantra should not expect to reach a level of ESR, which is unique to some minority of women; however, they can improve their sexual responses and orgasms very much (Figure 1).

Female orgasm has been described as a state of ASC in the literature [1-8,15,38,57]. During the prolonged orgasms, which may last for tens of minutes, some minority of women may achieve a different state of consciousness, ecstasy and blissful, oceanic, divine feeling or mood.

Psycho-neuropharmacology of female orgasm has a kind of “short hallucinogenic effect” on the women’s minds. Some women call it “Sexual Nirvana or Satori”, with the feelings of ecstasy and unification. In the documentary “Never Ending Orgasms” (NEO), scientists are now explaining the mechanism of it by the successive release of the love hormone “oxytocin”; some women can produce more oxytocin and release abundant amounts of oxytocin; while some cannot. Also, in the documentary, the enhancing role of dopamine is stressed. **Namely, during prolonged and multiple orgasms and NEO the brain is flooded with excessive amounts of dopamine and oxytocin.** (for the documentary please see: <https://www.youtube.com/watch?v=fwDbxyppfEg>).

In Tantric literature, it is also defined that a kind of Nirvana state can be achieved through prolonged sexuality and orgasms [9-14,60]. The terms “Tantric Orgasm or Cosmic Orgasm” are frequently referred in the Tantra books. Thus, enhanced and prolonged sensuality and climaxes can be regarded a means to reach to some peak experiences for women, as it was discovered during the pagan times, 2000 - 2500 years ago. We believe that many women can attain enhanced levels of sexual response, as defined in the literature [1-14]. **Afros**, the case we present here, was one of those blessed and gifted women mentioned in the old Eastern sexuality literature. Further neuroscientific investigation of **Afros** is being made and the data will be presented in a future article.



**Figure 6: Four nerve six pathway hypothesis of female orgasm.** At least six pathway-orgasmic reflex arch systems work during the development of female orgasms. Pudental, Pelvic, Hypogastric, intercostal and Vagus nerves constitute the main nerve network system. Also, there are at least two Oxytocin pathway systems, whereas Oxytocin works as a neurotransmitter and as a hormone, separately. During expanded orgasms and ESR orgasms, more than one 'orgasm reflex arch pathway' is activated and trigger an expanded orgasm, while many others contribute to the formation of an EO or ESR orgasms.

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