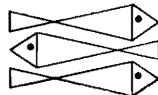


WILHELM REICH

*The*  
*Bioelectrical Investigation*  
*of*  
SEXUALITY  
*and*  
ANXIETY

TRANSLATED FROM THE GERMAN  
BY MARION FABER, WITH DEREK AND INGE JORDAN

*Edited by Mary Higgins and Chester M. Raphael, M.D.*



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*Love, work and knowledge are the wellsprings  
of our life. They should also govern it.*

WILHELM REICH



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# Foreword

My experimental studies during the years 1934 to 1938 gradually and logically centered on a single basic problem: how deeply is the function of the orgasm rooted in biology?

This book is composed of three studies from that period. They follow one another in a logical sequence which reflects the various stages of progress made in the development of orgone biophysics, a process which began in 1934 when I achieved a breakthrough into the biological foundation of psychoneuroses.\* The present volume can with good reason be understood as a logical continuation of my *Character Analysis*. It is the character analysis of the areas of biological functioning, so to speak. The discovery of biological energy, the orgone, was made solely as a result of the consistent and logical nature of the sex-economic theory of the biopsychic apparatus. At certain places in these studies, which were completed before 1939—i.e., before the discovery of the orgone—the reader will find statements and assumptions which were later fully confirmed by the previously unknown organotic pulsation function. The relevant places are marked by footnotes [1945].

The logic of the development of sex-economy into orgone biophysics is objective proof of its unbiased nature. If someone traversing unknown territory concludes from seemingly unimportant signs that a huge lake is nearby, and then, following these signs, actually comes to a great lake, that

\* Cf. "Psychic Contact and Vegetative Current" [Chapter XIII in *Character Analysis*].

is proof enough that he has observed and interpreted the signs correctly.

Orgone biophysics is firmly based on the foundation of direct observation, experimental testing of these observations, logical development of experiments, and interpretations that keep pace with the work process. It fills many gaps in natural science; for the first time, objective natural processes are concretely linked with subjective emotional life.

W. R.

1945

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## *The Orgasm as an Electrophysiological Discharge\**

Although in his compilation *Die Lebensnerven* (3rd ed., Springer, 1930) Müller makes general mention of the relationship between orgasm and the contraction of the smooth muscles, the physiology of orgasmic excitation has remained unexplained. To my knowledge, there have been no experiments on animals or humans. Various disorders are described in the sexological literature, but they are not considered in the context of how they relate to unconscious psychic life, or to the physiology of the sexual function, or to the social conditions of people's sex lives.

An orgasm is more complete and provides greater release the more the sexual excitation has been concentrated in the genitals and the more completely this excitation then ebbs away within the vegetative nervous system. The nature of this excitation is crucially important to the understanding of sexuality in general.

In the clinical treatment of neuroses and sexual disorders, orgasm is found to be a process of excitation which is characterized by the complete reduction of all psychic activity to vegetative tension and relaxation. We came to understand "orgasmic potency" as the ability to allow, free of all inhibitions, a relaxation of the corresponding tension

\* First published in German, in unrevised form, in Reich's *Journal for Political Psychology and Sex-Economy*, Copenhagen, 1934.



that has accumulated in the biophysical apparatus, and to experience it fully.

The following questions must be answered:

Is sexual tension nothing more than a mechanical phenomenon?

Is sexual stasis, then, an essentially mechanical process?

Is the relaxation that occurs with orgasm a mechanical relief, resulting from the emptying of engorged seminal vesicles or sperm ducts, as many opinions would have it, or does it involve merely a mechanical change in the surface tension of the sex organs?

These and similar questions demand an answer, for neuroses cannot be properly treated or prevented in the context of social sex-economy until these problems have been adequately settled. If the theory of sex-economy is correct in contending that orgasmic potency is the key to understanding the economy and dynamics of emotional life in general and of psychic disorders in particular, then one must understand the orgasm problem in order to understand neuroses, and vice versa.

## SOME PECULIAR FEATURES OF SEXUALITY

The assumption that sexual tension and relaxation are purely mechanical processes leaves unexplained many facts, which fit easily and without contradiction into an overall understanding if one assumes that, besides mechanical relaxation, a *bioelectrical discharge* occurs during orgasm, something which ought to be verifiable by experiment.

To start with, it might seem as if *mechanical relaxation* is restricted to men only and is not a valid explanation in the case of women. It is this mechanical view of events which led to the idea, predominant in sexology, that it is

“natural” for women not to experience orgasm. The sociological origin of this idea has been reported in detail elsewhere.\*

Orgastic phenomena in the healthy woman, which fully resemble those of the man, thus require explanation. Women are able to experience the same kind of rhythmic-clonic convulsions of the involuntary muscles; they experience peripheral concentration of excitation before climax and centripetal draining and ebbing away of excitation after climax, exactly the way men do.

In *coitus interruptus* a complete mechanical discharge takes place and often excitation at climax is even more intense than usual; nevertheless, there is an abiding sensation of not being satisfied or of having experienced inadequate relaxation, if any at all.

In *coitus condomatus*, too, a mechanical discharge takes place, while gratification is greatly diminished. This cannot be explained by the reduction in tactile sensations, for pure touch sensation is present; but the sensation of pleasure is lacking or reduced, and it is precisely this that needs to be explained. Unambiguous signs of stasis such as irritability, anxiety, lack of interest in work, which tend in time to accompany *coitus condomatus*, point to the lack of adequate relaxation.

Clinical investigations show that, depending on the type of female secretion, two fundamentally different tactile sensations of excitation occur during the sexual act, whether it is performed with the same partner or with different partners. Patients describe one kind of sensation as “watery” or “squishy,” the other as “oily” or “thick and abundant.” The first imparts less intense and qualitatively

\* C.f. Reich, *Die Sexualität im Kulturkampf*, 2nd ed., Sexpol-Verlag, 1936. [*The Sexual Revolution* (New York: Farrar, Straus and Giroux, 1974) —Ed.]

different sensations, compared to the second. The differences probably arise from, on the one hand, more serous or, on the other, more colloidal secretion in the female genital glands.

Probably the most striking fact is the relationship between genital friction and the contraction of the genital muscles. Their tone is greatly increased during erection. In addition, any friction produces an involuntary contraction, unless one voluntarily tenses against it. With increasing friction, the involuntary muscle contractions increase in intensity. As the climax approaches, the contractions become *clonic*; i.e., several spontaneous muscle contractions follow each other in quick succession, and they cannot voluntarily be inhibited, even when the friction has stopped. While up to the point where clonus occurs, friction causes the muscles to contract, from that moment on, the clonus of the genital muscles seems to determine the contraction of the voluntarily innervated muscle systems of the abdominal wall, legs, face, and arms. This is the central aspect of the "spread of excitation throughout the body."

We must explain why orgasmically impotent compulsive characters experience no gratification despite mechanical release; and why friction exerted on the spermatic duct and pelvic floor does not trigger any muscular contractions in patients suffering from the inability to ejaculate.

The fact that sexual compatibility exists between certain men and certain women is a very remarkable phenomenon which until now has remained completely unexplained and has merely been glorified in mystical terms. It is a mutual attraction and, as it later turns out, a compatibility in sexual rhythm, which often operates at first sight without either of the individuals being aware of it. If one disregards genital compatibility (which cannot be the reason for the phenomenon), psychic characteristics, appearance, etc.,

one arrives at the conclusion that there is something, which laymen tend to label "sexual aura" or "sex appeal." These spontaneous unconscious object choices tend to prove "harmonious" if no serious complications intervene. The actual nature of this harmony, however, remains unexplained.\* The fact that people who lack free-flowing sexuality are felt to be "unattractive" by persons with strongly erotic natures is part of the same problem.

When the male member touches the moist mucous membrane of the female vagina, a difficult-to-control urge arises to make complete contact between the penis and the surface of the vagina. The man feels driven to penetrate completely and the woman to accept him fully. (In contrast to this "genital magnet effect," as we might call it, speaking for the moment simply metaphorically, orgasmically impotent men and frigid women exhibit no such urge, or only a very diminished one, despite vaginal lubrication; or else such people act with conscious intent, knowing that one "should" penetrate and accept, respectively.) A further indication of this remarkable phenomenon is that withdrawal of the member means overcoming a resistance which is a physically unpleasurable stimulus to the point of being painful. This sensation is particularly pronounced when withdrawal takes place at climax, the height of excitation. Then the pleasurable muscular contraction begins to produce pain. It is the same with patients who voluntarily or unconsciously tense the muscles of the pelvic floor and genitals too much during intercourse and are then overwhelmed by excitation. Such people tend to develop a great fear of the sexual act and the excitation.

If the female genital organ is dry, the sexual act pro-

\* Since 1939, the existence of "biosexual contact" has been confirmed and explained by the function of the contact of two fields of organotic excitation.

duces nothing more than ordinary tactile pleasure, even if friction leads to mechanical relaxation in the man.

Onanistic gratification is reduced when friction is produced with a dry hand rather than one moistened with saliva. A therapist must be aware of this if he wishes to improve the genitality of impotent men. Likewise, when using a condom, the sensation is greater if the condom is moistened inside.

It is not immediately apparent why gentle and slow friction produces an incomparably stronger sensation than vigorous and rapid friction. This cannot be explained in tactile, mechanical terms alone.

Detailed inquiries in sex-counseling centers, which are borne out by clinical experience, show that there are two kinds of frictional movements: one is thrusting, strenuous, and executed with the entire torso; the other is more spontaneous, undulating, and limited to the pelvic region. The first occurs in persons with strong muscular armor, as for example in emotionally blocked individuals, who have to actually overcome their vegetative inhibition, etc. The second occurs only in muscularly relaxed and also psychically free-flowing people. We know that the first form is determined by the attempt to compensate for a lack of *spontaneous* movement. What determines the second has yet to be explained.

Let me in conclusion indicate a gap in our understanding of the complex orgasm phenomenon. Following orgasmic release, the genitals can suddenly no longer be stimulated, and the mental image of the sexual act cannot be reproduced or is completely without affect. The view that the release is mechanical, based on the vascular congestion of the genital organs, is inadequate, because the hyperemia disappears only very gradually. This seems to be a *consequence* of the sudden drop in excitation, rather than its

cause. If one wished to explain the phenomenon in terms of neuronal sensitivity, one would first have to explain why the end-organs become refractory precisely after discharge.

All the phenomena enumerated here can be understood by assuming that the orgasm represents a *bioelectrical* discharge. To my knowledge, this view is new in scientific research, although here and there it is accepted as a fact in popular belief. If it is correct, we must first of all demonstrate and clarify the relationship of mechanical relaxation to bioelectrical discharge.

### THE ORGASM FORMULA:

**Mechanical tension → bioelectrical charge →  
bioelectrical discharge → mechanical relaxation**

The orgasmic function must be part of the natural order of things, and in fact an elemental part. The basic function of all living matter, namely tension and relaxation, charge and discharge, is represented here in its purest form. It also combines two fundamental directions of vegetative flow which we will discuss in detail later. Orgasmic discharge produces a feeling of pleasure and fusion with the object; its blocking, on the other hand, produces a feeling of anxiety and separation from the object. The orgasmic function also represents one of the most important nodal points of the body-soul problem.

Vegetative excitation of the genitals is the first requirement of the orgasmic function. The erection is essentially an intense filling of the genital blood vessels, beginning with the genital arteries (parasympathetic effect). The genital muscles, too (M. ischocavernosus and bulbocavernosus), are parasympathetically excited, resulting in increased tonus. This causes a compression of the efferent blood vessels

(venous plexus), located closer to the surface than the arteries. (The antithesis is sympathetic, anxious excitation which contracts the arteries and renders the genital muscles flaccid, thus impeding the erection.) The more completely this excitation takes over, the more constricted the urethra becomes; that is to say, the stronger the tone of the peripheral genital muscles, the stronger must be the subsequent contractions of those muscles, which propel the semen through the barrier of muscles and vessels.

In women, the erection process is in principle the same as in men. Here, too, arterial hyperemia and secondary venous congestion of the corpora cavernosa clitoridis and of the bulbo vestibuli (the vascular spaces around the clitoris and around the orifice of the vagina) occur.

Thus, we must distinguish between the following elements of mechanical tension: in men, the tension in the seminal vesicles and the spermatic ducts; in both sexes, the tension due to heightened "turgor" of the genital glands and tissues; the tension arising from engorgement of the corpora cavernosa; the tension of the skin and mucous membranes.

The well-known sensation of tension in the genitals during sexual excitation thus has a direct mechanical basis; i.e., the heightened mechanical tension of the tissues. The symptomatology of sexual disorders, especially female disorders, has shown that any voluntary tensing of the striated genital muscles either impedes gratification or makes it completely impossible. This means that overcoming the mechanical tension through the process now to be described is all the more pleasurable, and the excitation is quantitatively more intense, the more relaxed the person's state.

The next question is, how does relaxation come about after parasympathetic excitation has produced mechanical tension. Let us remind ourselves of the evidence, described

earlier as problematic, that friction results in *involuntary* contractions of the smooth and striated genital musculature. Any friction—i.e., any change in the surface contact between the vaginal mucosa and the penis—produces a muscle contraction in healthy individuals. During resting contact—i.e., when there is no motion—no contraction occurs (except at the end stage), and in fact the tonus may decrease.

We know that a muscle reacts with a twitch to galvanic stimuli both when the electric current is applied and when it is removed (“closing” and “opening” twitch). The striated muscle contracts quickly and relaxes just as quickly; the smooth muscle, on the other hand, contracts in a long-drawn-out wave. We are thus forced to conclude that muscle contractions due to friction are the same as those that occur in electrically stimulated muscles. As the frequency and intensity of friction increase, the waves of contraction increase; and when the transition is made to the climax, tetany—i.e., a prolonged spasm at the height of contraction—occurs, just as it does when a quick succession of electrical stimuli is applied. This tetany is then released, with or without further friction, in a muscle clonus; i.e., a series of involuntary automatic contractions of all the genital muscles. It is not the tetanic contraction but this clonus which constitutes orgasm and brings about release of tension; the contractions recede and give way to a feeling of complete relaxation followed by sleepiness. It is now clear what brings about the ejaculation of semen and release of tension: during orgasm, all the excitation or tension which has been built up as a result of the preceding stimulation (friction) is discharged in several spontaneous muscle contractions, which are no longer dependent on stimulation; energy is dissipated and a state of rest follows.

With the powerful clonic muscle contraction, the semen



in the male is transported out of the reservoirs, through the barrier of the tonically contracted penile musculature, and thus provides a secondary, mechanical discharge. In the same way that mechanical tension was needed for the electrical charge to build up in the genital organs, so electrical discharge is now the determining condition for mechanical relaxation. Since this reciprocal relationship between mechanical and electrical processes represents the actual orgasmic process, we will call it the "*tension-charge process*" or the "*discharge-relaxation process*," which together constitute the orgasm.

The essence of the gratifying relaxation is not the mechanical but rather the bioelectrical discharge, as it is manifested in the muscle contractions. Even slight electric voltages are enough to produce a discharge of semen in the male. Gratification, however, is not dependent on ejaculation; rather, its intensity is proportional to the preceding mechanical tension, to the resulting electrical charge, and to the resistance which must be overcome when the transition is made to the clonic state. For that reason, ejaculation during sleep or with partial erection produces little or no pleasure or relaxation. Relaxation is, therefore, all the more complete the greater the preceding tension of the erection has been. And thus, one of the most significant characteristics of orgasmic potency is the rhythm and force of ejaculation, not the ejaculation per se.

Measuring the amount of charge and discharge in healthy people during intercourse would be a very important aid to understanding the pathology of a number of disorders of the vegetative functions. Unfortunately, there are—at the present time, at least—great obstacles barring this approach. Aesthetic considerations would not have to come into it; often, what is considered aesthetic today may be

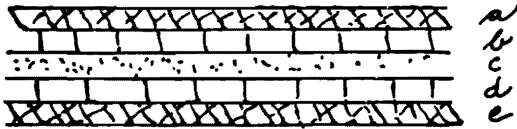
regarded as narrow-minded tomorrow. It is not aesthetic problems but those of a technical nature which stand in the way of such a study: the subjects' awareness of the measuring procedure would falsify the results. *C'est tout!* Yet, on the basis of the measurements that have been possible up to now, we can safely say the following:

In the sexual act, two bioelectrically highly charged organisms come into contact with one another.\* The higher psychic functions cease temporarily. Everything is concentrated on the discharge of vegetative high tension. Two bodies experiencing orgasmic ecstasy are nothing more than a quivering mass of plasm. Anyone who considers this assertion an "insult to his sense of delicacy" simply reveals his own unnaturalness. Whatever force is capable of forging people and all living nature into *one* is infinitely broader in scope and on a higher plane than decadent drawing-room philosophizing about the unattainable. We are concerned here with very practical questions about life.

The arrangement of membranes, boundary surfaces, and fluids during sexual intercourse indicates that a complete electrolytic system has been established. The surface of the penis must be seen as one electrode and the vaginal mucosa as the other. The contact between the two is made by the acidic female secretion acting as an electrolyte. Water, which does not conduct, is not an electrolyte. Saliva, on the other hand, does conduct. It is no coincidence that, as clinical experience has shown, sexual sensation declines

\* [1945] This view preceded the later *orgone-physical* discovery that intercourse involves excitation and contact, the *radiation* of body cells, and the *fusion* of two "orgonotic systems." In the interest of illustrating the *development* of orgone biophysics, the following, no longer valid, electrophysiological explanation of the sexual act, as arrived at in 1935, will be given.

when the vaginal mucous membrane is moistened with water; saliva, on the other hand, enhances sensation, although not to the same degree as vaginal secretion, which is a colloidal-acidic solution. As we know, the intensity of pleasurable sensation depends on the ratio of the colloidal to the aqueous portion of the secretion:



- a*—male circulation
- b*—male boundary surface (skin of penis)
- c*—female secretion (conductor-electrolyte)
- d*—female boundary surface (vaginal mucosa)
- e*—female circulation

If one regards the sexual act as essentially an electrical process, the phenomenon of the genital “magnet effect” as well as the muscle contractions due to friction becomes understandable. In accordance with the laws of physics, the difference in potential between two charged surfaces in contact with each other will equal itself out to a greater or lesser extent depending on the size of the contact area (the larger the area, the greater the degree of equalization). In consequence, the urge toward complete contact of the genital surfaces—i.e., toward complete penetration or complete acceptance of the male member—is explained by the partial relaxation which facilitates complete contact, and by the tension of the parts not in contact. Thus, we have to distinguish between two kinds of pleasure: first, that arising from partial relaxation during resting contact which

is a model of end-pleasure, when the entire charge is dissipated and relaxation is complete; second, the pleasure arising from friction, i.e., pleasure which is caused by stimulation and the muscular contraction connected with it. This motor pleasure, too, which is surely a model of any kind of muscular-motor pleasure, anticipates a process that occurs completely during orgasmic clonus. The first type of pleasure can be called "relaxation pleasure," and the second "tension pleasure." The first is an important result of lowering potential and the second of raising it. The process is clearly manifest in the case of resting contact during coitus, when tensions are being equalized, and after the orgasm, when release of tension is complete.

The nature of tension pleasure is less clear. According to our assumptions, tension should produce unpleasure and not pleasure, which we generally think of as an expression of the release of tension. If tension has been built up by friction, it largely dissipates when the genitalia remain in full contact for a while without friction. It then rises again when friction recommences. This tension is experienced as pleasurable. How can we reconcile the increase in tension with its accompanying pleasure ("tension pleasure")? No doubt the potential surfaces are recharged with each friction; but just as surely, the accompanying contraction of the muscles dissipates the accumulated energy, and this contracting makes the increased tension pleasurable instead of unpleasurable. We can mention two facts which support this assertion. First, without touching on our problem, F. Kraus concludes from his studies that the nerve acquires tension during excitation, while the contracting muscle discharges the stored excitation. When friction occurs, the interface and the various parts of the vegetative system build up energy, while the contracting genital mus-

cles discharge energy. Forepleasure, then, would seem to consist of a simultaneous charge and partial discharge. I put forward this hypothesis in 1923 in my work "Zur Triebenergetik,"\* simply on the basis of the phenomenology of the sexual act. Forepleasure can thus be understood as a functional process which offers an explanation for the pleasurable nature of tension. Second, it is striking that erotogenic (perverse) masochists experience each intensification of pleasure brought about through friction as unpleasurable, which thus forces them to avoid it. One is also struck by the fact that a basic characteristic of perverse masochists is that they voluntarily tense their genital muscles and thereby prevent involuntary friction-induced contractions. This proves that without the frictional contraction the friction by itself as a pure charging process is unpleasurable and is therefore avoided (as, for example, incessant tickling).

End-pleasure, in contrast to forepleasure, is pure pleasure. It is based solely on muscular discharge, which also reduces nervous excitation in a manner which is still completely unexplained. This last assumption has to be made, for after orgasm the nervous system is incapable of becoming recharged. For a while no mental image and no friction is capable of recharging the vegetative system. The surfaces of the genitals also fail to respond to stimulation. The possibility of a new charge must, however, be linked with the relaxation. The fact that regular, gratifying sexual intercourse develops greater orgasmic potency is evidence of this, as is also the fact that infrequent gratification causes potency disorders.

\* "Concerning the Energy of Drives." [Included in *Early Writings, Volume One* (New York: Farrar, Straus and Giroux, 1975)—Ed.]

Frigid women lack not only involuntary muscular contractions, because they voluntarily tense all their muscles, but also frictional tension is missing, because of dryness of the vagina mucosa.

In patients suffering from premature ejaculation, the genital muscles involuntarily begin to twitch too soon (intermittent ejaculation) or to contract tonically (flow of semen only). In these cases, excitation is probably transmitted too soon from the vegetative nervous system to the muscles; but the physiology of the process is very unclear.

There are fundamental differences also in the sexual behavior of both sexes which are based on the differences in their orgasmic potency. It appears that people who are able to experience frictionally induced orgasmic twitching movements are much more capable of maintaining monogamous relationships than people who experience only the sensations stemming from mechanical release. The monogamous behavior is based neither on the inhibition of polygamous impulses nor on moral considerations, but on the sex-economic principle of genuine pleasure which is repeatedly experienced. The basis for such pleasure is full sexual harmony with the partner. There is no difference between men and women in this respect. If, on the other hand, a suitable partner is lacking, which is usually the case given the prevailing conditions of sexual life, then the capacity for monogamy turns into its opposite; namely, an unremitting search for a suitable sex object. This kind of polygamous behavior is in no way to be considered neurotic; but if the stasis persists, it can lead to neurosis. This behavior is not based on sexual repression but, on the contrary, on natural sexual impulses. If the right partner is found, monogamous behavior reasserts itself automatically and continues for as long as the sexual compatibility and gratification

last. Thoughts and desires centered on other partners are either very weak or else, again for sex-economic reasons, they are not acted upon. This is the case as long as another partner is not thought sexually equal or superior to the first, a fact which is clearly sensed. However, the old relationship breaks down totally when a new one promises greater pleasure. This fact is hopelessly at odds with the entire sexual organization of modern society, where material conditions and consideration for children run counter to the sex-economic principle. Under the conditions of the sex-denying social order, it is precisely the healthiest people who are subjected in this way to the greatest suffering.

People who are orgasmically disturbed, and thus incapable of electric charge and discharge, behave differently. Since they experience less pleasure during intercourse, they are either in a better position to do without a sexual partner for short or long periods, or else they are less discriminating; sex does not mean very much to them. If they are polygamous, it is due to a defective sexual structure. They always exhibit more or less deeply rooted disorders in their work performance, which is not the case with the former type. They are better able to adapt to the conditions of marriage. However, their fidelity is not based on sexual gratification but on moral inhibitions; i.e., not on sex-economic principles but on principles of compulsory sexual morality. They are always subject to neurotic regression to childhood conflicts. Their polygamy is not very gratifying, and if the condition continues for a long time, they become increasingly unable to find a suitable sex partner. They are often better able to comply with the demands of bourgeois society, but at the same time they pay for this compliance by developing neurotic disorders which affect all members of the family, especially the children. This is erroneously viewed as the

effect of “heredity.” If they undergo vegetotherapy,\* and it is successful in establishing orgasmic potency, their behavior is transformed and they begin to develop all the attributes of the genital character.

*Orgasm is an elementary natural phenomenon*; it governs all living creatures who have the capacity for vegetative expansion and contraction. The tension → charge → discharge → relaxation process which has been revealed and which governs the orgasm requires extremely precise study. First, we must discover in which fundamental vegetative phenomena of life it is rooted. Then we must prove it experimentally.

Let us now turn to the relationships between sexual excitation and anxiety.

\* Reich applied this term to the therapeutic technique he developed after his discovery of muscular armor and the orgasm reflex (1935). It indicated his shift of emphasis from the psychological to the physiological and the fact that this technique directly influenced the functioning of the vegetative nervous system.—Ed.