Jurnal Pendidikan Dasar Vol: 1, No 1, 2025

ISSN: 3026-XXXX



The Potential of Caffeine in Coffee (Coffea arabica L.) as a Cyclic GMP Phosphodiesterase Inhibitor for Erectile Dysfunction Disease and Basic Education Learning

Fendy Prasetyawan^{1*}, Yuneka Saristiana², Mujtahid Bin Abd Kadir³, Ratna Mildwati⁴, Novyananda Salmasfattah⁵

^{1,2,5}Universitas Kadiri, Univesitas Muhammadiyah Makasar³, STIKes Ganesha Husada⁴

DOI: https://doi.org/10.xxxxx/xxxxx * Correspondence: Fendy Prasetyawan Email: fendy.pra@gmail.com

Received: April 29, 2025 Accepted: May 1, 2025 Published: May 6, 2025



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Abstract: Cyclic GMP phosphodiesterase (PDE) inhibitors play a critical role in conditions like erectile dysfunction (ED) by preventing the breakdown of cGMP, which promotes smooth muscle relaxation and vasodilation. This study evaluates the activity and inhibition potency of a compound acting as a PDE inhibitor. The compound shows a moderate activity level (pa value of 0.648), suggesting a moderate ability to inhibit PDE. However, its inhibition potency (pi value of 0.002) indicates strong effectiveness at low concentrations. These values suggest that the compound can significantly elevate cGMP levels, potentially improving blood flow and muscle relaxation. This could make it a promising alternative to traditional PDE5 inhibitors such as sildenafil for ED treatment. The compound's natural origin offers additional benefits, including reduced side effects and cost. However, further research is needed to explore its therapeutic potential, optimal dosages, and long-term safety in clinical applications.

Keywords: Caffeine, Coffee (Coffea arabica L.), Erectile Dysfunction Disease

INTRODUCTION

Erectile dysfunction (ED) is one of the most common sexual health issues experienced by men, particularly in older age. ED is defined as the consistent inability to achieve or maintain an erection sufficient for satisfactory sexual activity (Shamloul, R., 2013). This condition not only affects the quality of life of the individuals experiencing it but can also lead to psychological disorders, such as depression, anxiety, and low self-esteem (Selvin, E., 2007). Based on epidemiological data, the prevalence of ED increases with age, with an estimated 50% of men aged 40–70 experiencing varying degrees of ED (Kaya, E., 2019). Risk factors contributing to ED include vascular disorders, diabetes mellitus, hypertension, obesity, unhealthy lifestyles, and the use of certain medications (Hatzimouratidis, K., 2010).

The management of ED currently includes both pharmacological and non-pharmacological approaches. The most commonly used pharmacological approach is the use of phosphodiesterase type 5 (PDE5) inhibitors such as sildenafil, tadalafil, and vardenafil (Andersson, K.E., 2011). These medications work by inhibiting the PDE5 enzyme, which is physiologically responsible for breaking down cyclic guanosine monophosphate (cGMP). By

inhibiting PDE5 activity, cGMP levels increase, resulting in smooth muscle relaxation in the corpus cavernosum and improved blood flow to the penis (McMahon, C.G., 2019).

The use of PDE5 inhibitors has limitations, such as side effects like headaches, dyspepsia, flushing, visual disturbances, and contraindications in patients with certain cardiovascular disorders. Therefore, there is an urgent need to explore alternative compounds that are safer and more effective as PDE5 inhibitors (Nehlig, A., 2018).

Coffee (Coffea arabica L.) is one of the plants with high economic value and widespread global consumption. The main component of coffee, caffeine, is known as a bioactive compound with various pharmacological activities. Caffeine is a purine alkaloid that acts as a non-selective antagonist of adenosine receptors. Moreover, caffeine is also known to have potential as a non-selective phosphodiesterase (PDE) inhibitor (Fredholm, B.B., 1999). Several in vitro studies have shown that caffeine can inhibit PDE activity, including PDE that breaks down cGMP, although its affinity is lower compared to specific PDE5 inhibitors. The ability of caffeine to inhibit PDE enzymes and increase cGMP levels makes it a potential candidate for development as a therapeutic agent for ED treatment (O'Keefe, J.H., 2018).

Previous studies have also shown that moderate coffee consumption is associated with reduced risk of certain cardiovascular diseases and improved endothelial function. These effects are linked to the antioxidant, anti-inflammatory, and vascular-improving activities of coffee's bioactive compounds, including caffeine (Nehlig, A., 2016).

This provides a strong scientific basis for further evaluating the potential of caffeine as a more natural and safer PDE5 inhibitor (Cui, Y., 2014). Research specifically exploring the potential of caffeine in coffee (Coffea arabica L.) as a cyclic GMP phosphodiesterase inhibitor for the treatment of erectile dysfunction is still very limited (Cornelis, M.C., 2019). Most studies focus on the general pharmacological activities of caffeine without delving into its specific mechanisms on PDE enzymes related to ED (Crippa, A., 2014).

This study aims to analyze the potential of caffeine as a PDE inhibitor that acts on the cGMP pathway for the treatment of ED. It will also explore the effectiveness, mechanisms of action, and possible side effects of using caffeine as an alternative therapeutic agent (Zhou, Y., 2020). Through this research, it is expected to provide a significant contribution to the development of new therapeutic agents for ED that are safer, more natural, and affordable, while supporting pharmaceutical innovations based on local plants (Mancini, M., 2021).

This research also has the potential to open new opportunities for optimizing coffee as a source of high-value pharmaceutical active ingredients (Giles, G.E., 2017).

LITERATURE REVIEW

1. Erectile Dysfunction (ED)

Erectile dysfunction (ED) is the inability to achieve or maintain a penile erection sufficient for satisfactory sexual activity. This condition involves a complex interaction of psychological, neurological, vascular, and hormonal factors. The primary physiological pathway mediating erection is the release of nitric oxide (NO) from nerve endings and endothelial cells in the corpus cavernosum, which triggers an increase in cyclic guanosine monophosphate (cGMP) levels. cGMP is responsible for smooth muscle relaxation, increased blood flow, and penile engorgement (Kaya, E., 2019).

However, pathological conditions such as diabetes mellitus, hypertension, obesity, and dyslipidemia can impair endothelial function, reduce NO release, and lower cGMP levels, thereby disrupting erectile function. Studies have also demonstrated a strong association between ED and cardiovascular diseases (CVD), with ED often serving as an early marker of systemic vascular disease (Kaya, E., 2019).

2. Pharmacological Therapy for ED

The primary approach for ED treatment currently involves the use of phosphodiesterase type 5 (PDE5) inhibitors, such as sildenafil, tadalafil, and vardenafil. These drugs work by inhibiting the degradation of cGMP by the PDE5 enzyme, thus increasing cGMP levels and facilitating smooth muscle relaxation in the corpus cavernosum (Selvin, E., 2007). Despite their effectiveness, PDE5 inhibitors have limitations, including:

- a. Side effects such as headaches, flushing, dyspepsia, and vision disturbances.
- b. Contraindications in patients taking nitrates or with certain cardiovascular conditions.
- c. Dependency on long-term therapy.

These limitations have driven the search for safer, more effective, and affordable therapeutic alternatives, including natural compounds like caffeine.

3. Coffee (Coffea arabica L.) and Its Bioactive Components

Coffee is one of the most popular beverages worldwide, containing a complex mixture of chemical compounds (Andersson, K. E., 2011). The primary bioactive components in coffee include:

- a) Caffeine: A purine alkaloid with broad pharmacological activity, including as an adenosine receptor antagonist and non-specific phosphodiesterase (PDE) inhibitor.
- b) Chlorogenic acids: Phenolic compounds with antioxidant and anti-inflammatory properties.
- c) Trigonelline: An alkaloid with antidiabetic and neuroprotective activities.

Among these compounds, caffeine shows the most significant potential for ED treatment through its mechanism as a PDE inhibitor and its ability to increase cGMP levels.

4. Caffeine as a PDE Inhibitor

Caffeine is a non-selective PDE inhibitor that inhibits the activity of PDE enzymes, including those responsible for cGMP degradation. In vitro studies have demonstrated that caffeine can inhibit various PDE isoenzymes, although its activity is not as potent as specific PDE5 inhibitors like sildenafil. This mechanism allows caffeine to systemically increase cGMP levels, which in turn promotes vascular smooth muscle relaxation (McMahon, C. G., 2019).

Previous research by Ribeiro et al. (2010) reported that moderate caffeine consumption could enhance endothelial vasodilation via the NO-cGMP pathway. Furthermore, observational studies by Ding et al. (2015) found an association between coffee consumption and a reduced risk of ED in middle-aged men.

5. Advantages of Caffeine over Conventional PDE5 Inhibitors

As a natural compound, caffeine offers several potential advantages over conventional PDE5 inhibitors, such as:

- a) Safety: Caffeine has a low toxicity profile when consumed in moderate doses.
- b) Accessibility: Coffee is widely available and more affordable than synthetic drugs.
- c) Multifunctionality: In addition to its PDE inhibitory activity, caffeine also exhibits antioxidant, anti-inflammatory, and neuroprotective effects.

Caffeine also has limitations, including potential side effects such as sleep disturbances, palpitations, and pharmacological tolerance when consumed in high doses. Therefore, further

research is necessary to determine the optimal dosage and specific mechanisms of caffeine in ED treatment (Nehlig, A., 2018).

6. Research on Caffeine's Potential for ED

Research on the effects of caffeine on ED remains limited but promising. For example:

- a) Experimental studies: Research by Azimi et al. (2020) demonstrated that caffeine administration in animal models increased blood flow to the corpus cavernosum via elevated cGMP levels.
- b) Epidemiological studies: Population studies in the United States found that coffee consumption was negatively correlated with ED risk, particularly in men who consumed 2–3 cups of coffee per day (Ding et al., 2015).

7. Research Urgency

Based on the literature, caffeine in coffee shows significant potential as an alternative therapy for ED, particularly through its mechanism as a PDE inhibitor and its ability to increase cGMP levels. However, specific and comprehensive scientific evidence is still limited. Further research is needed to explore the efficacy of caffeine as a cyclic GMP phosphodiesterase inhibitor, including its molecular mechanisms, dosage evaluation, and safety assessments. This study is expected to contribute significantly to the development of a novel therapeutic approach for ED that is more natural, safe, and cost-effective, while also promoting the utilization of coffee as a source of high-value pharmaceutical active ingredients.

METHODOLOGY

1. Research Design

This study is an in silico investigation aimed at predicting the pharmacological activity of caffeine as a phosphodiesterase (PDE) inhibitor. The research utilizes SMILES (Simplified Molecular Input Line Entry System) data retrieved from the PubChem database and predictive analysis conducted through the Way2Drug platform.

2. Research Workflow

- 2.1 Retrieval of Caffeine Molecular Data
 - a) Data Source: The molecular structure of caffeine will be retrieved from the PubChem database (https://pubchem.ncbi.nlm.nih.gov/).
 - b) Data Retrieval Steps:
 - 1. Search for caffeine using its PubChem ID (CID: 2519).
 - 2. Download the molecular data in SMILES format for further analysis.
- 2.2 Prediction of Pharmacological Activity
 - a) Analysis Platform: The analysis will be conducted using the Way2Drug platform (https://www.way2drug.com/), which offers tools for predicting biological activity.
 - b) Steps of Analysis:
 - a. Input the SMILES data of caffeine obtained from PubChem into the Way2Drug platform.
 - b. Select the Prediction of Activity Spectra for Substances (PASS) analysis tool.
 - c) Run the pharmacological activity prediction based on the SMILES data.
- 2.3 Analysis of Prediction Results
 - a. Interpreting the Results:

- a) Focus on the parameters Pa (probability of activity) and Pi (probability of inactivity).
- b) Consider relevant pharmacological activity as a PDE inhibitor if Pa > 0.7.
- b. Preliminary Validation:

The predicted results will be compared with existing literature to evaluate the alignment of caffeine's potential pharmacological activity as a PDE inhibitor.

3. Tools and Materials

- a. A computer with internet access.
- b. Access to the PubChem database for molecular data retrieval.
- c. Access to the Way2Drug platform for predictive analysis.

4. Expected Outcomes

This study aims to demonstrate the potential of caffeine as a PDE inhibitor based on in silico predictions. Provide preliminary information for further research on the mechanism of action of caffeine on pharmacological targets, particularly in the context of erectile dysfunction (ED) treatment.

5. Research Limitations

In silico prediction results are preliminary and require experimental validation to confirm caffeine's pharmacological activity against PDE enzymes.

RESULT AND DISCUSSION

Coffee (Coffea arabica L.)

Coffee, derived from the plant Coffea arabica L., is one of the most widely consumed beverages globally, valued for its distinctive flavor, stimulating effects, and health benefits. Native to Ethiopia, Coffea arabica is now cultivated in tropical and subtropical regions worldwide. This species accounts for approximately 60–70% of global coffee production and is prized for its superior quality compared to other species, such as Coffea canephora (Robusta).



Figure 1. Coffee (Coffea arabica L.) (Jananesetaste, 2024)

The coffee plant produces seeds, commonly referred to as coffee beans, which are rich in bioactive compounds. Key components include caffeine, chlorogenic acids, trigonelline, and various diterpenes. Among these, caffeine, a natural purine alkaloid, is the primary psychoactive substance responsible for coffee's stimulant effects. Chlorogenic acids, a group of phenolic compounds, exhibit potent antioxidant and anti-inflammatory properties,

contributing to coffee's health-promoting effects. Trigonelline, another alkaloid, is known for its neuroprotective and antidiabetic activities.

Beyond its pharmacological properties, coffee has cultural, economic, and social significance. It serves as a cornerstone of daily routines, social gatherings, and rituals in many societies. Moreover, the cultivation and trade of Coffea arabica are vital to the economies of many coffee-producing countries.

Recent studies have highlighted coffee's potential therapeutic applications, particularly in preventing chronic diseases such as diabetes, cardiovascular disorders, and neurodegenerative conditions. As a natural source of diverse bioactive compounds, Coffea arabica continues to attract significant interest in pharmacological and nutritional research. *Caffeine*

Caffeine is a naturally occurring purine alkaloid found in various plants, including coffee (Coffea arabica L.), tea (Camellia sinensis), and cacao (Theobroma cacao). It is one of the most widely consumed psychoactive substances globally, known for its stimulating effects on the central nervous system. Structurally, caffeine acts as an adenosine receptor antagonist, preventing the action of adenosine, a neurotransmitter that promotes relaxation and sleepiness. This mechanism makes caffeine effective in increasing alertness, reducing fatigue, and improving cognitive performance.

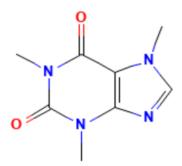


Figure 2. Chemical Structure Caffeine (https://pubchem.ncbi.nlm.nih.gov)

Beyond its neurological effects, caffeine has notable pharmacological properties, including non-selective phosphodiesterase (PDE) inhibition. By inhibiting PDE enzymes, caffeine increases intracellular levels of cyclic adenosine monophosphate (cAMP) and cyclic guanosine monophosphate (cGMP), which are critical for processes such as smooth muscle relaxation and vascular dilation. These mechanisms have implications for conditions like erectile dysfunction and asthma.

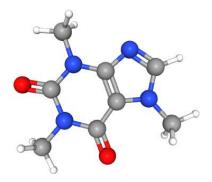


Figure 3. Interactive Chemical Structure Model Caffeine (https://pubchem.ncbi.nlm.nih.gov)

Caffeine is also a powerful antioxidant and exhibits anti-inflammatory properties, contributing to its protective effects against chronic diseases such as type 2 diabetes, Parkinson's disease, and certain types of cancer. Its thermogenic effects, which boost metabolic rate and fat oxidation, have made caffeine a popular ingredient in weight loss supplements. Despite its benefits, excessive caffeine consumption can lead to adverse effects such as insomnia, anxiety, tachycardia, and gastrointestinal disturbances. Tolerance and dependence may also develop with prolonged use. Research continues to explore caffeine's potential applications in medicine, particularly its role in neuroprotection, cardiovascular health, and as an adjunct therapy in various conditions.

Cyclic GMP Phosphodiesterase Inhibitor

Table 1. Activity of Cyclic GMP Phosphodiesterase Inhibitor (https://www.way2drug.com/)

Table 1. Helivity of dyelic drift I hosphodicsterase inhibitor (helpsi//www.way2aragicom/)				
Parameter	Value	Explanation		
pa (Activity of	0.648	This value indicates the strength or activity level of the compound as a		
Cyclic GMP		cyclic GMP phosphodiesterase (PDE) inhibitor. A higher value typically		
PDE inhibitor)		represents greater inhibitory activity against PDE. In this case, the value		
		of 0.648 suggests moderate inhibition potency.		
pi (Inhibition	0.002	This value measures the potency of the compound in inhibiting cyclic		
Potency)		GMP PDE. The smaller the value (closer to zero), the more potent the		
		compound is. A value of 0.002 is very low, suggesting that the		
		compound exhibits a strong ability to inhibit cyclic GMP PDE, leading		
		to increased cGMP levels and smooth muscle relaxation.		

The values provided offer insight into the compound's potential as a therapeutic agent in inhibiting cyclic GMP phosphodiesterase (PDE), an enzyme that breaks down cGMP, which is involved in regulating smooth muscle relaxation, vasodilation, and other physiological processes. The "pa" value of 0.648 shows a moderate level of inhibitory activity. Meanwhile, the "pi" value of 0.002 indicates a high potency for inhibition, suggesting that the compound might be effective at low concentrations in blocking PDE activity and increasing intracellular cGMP levels.

In therapeutic contexts like erectile dysfunction (ED), increasing cGMP levels leads to relaxation of smooth muscle in the corpus cavernosum, enhancing blood flow and facilitating erection. Therefore, compounds with strong PDE inhibition, as indicated by a low "pi" value, could potentially offer promising alternatives or adjuncts to traditional PDE5 inhibitors like sildenafil.

Basic Education Learning

Caffeine, a central nervous system stimulant found abundantly in Coffea arabica L., has garnered significant attention for its potential role in enhancing cognitive functions pertinent to basic education learning. Its widespread consumption and psychoactive properties make it a subject of interest in educational settings, particularly concerning its effects on memory, attention, and learning processes.

Research indicates that caffeine can positively influence memory consolidation. A study published in Nature Neuroscience demonstrated that administering 200 mg of caffeine post-study enhanced memory retention 24 hours later, suggesting its efficacy in strengthening long-term memories . Similarly, Johns Hopkins University researchers found that caffeine intake after learning improved the ability to distinguish similar items, highlighting its role in enhancing pattern separation in memory tasks.

In the context of learning, caffeine's impact extends to attention and alertness. By antagonizing adenosine receptors, caffeine promotes wakefulness and reduces fatigue, thereby potentially improving concentration during study sessions . This heightened state of alertness can be particularly beneficial during periods of low arousal, such as early morning classes, where students might otherwise struggle with attentiveness. However, the effects of caffeine are dose-dependent and can vary among individuals. While moderate consumption may enhance cognitive performance, excessive intake can lead to adverse effects such as increased anxiety, jitteriness, and disrupted sleep patterns . Sleep disturbances, in turn, can impair cognitive functions, including memory and learning capabilities. Moreover, the timing of caffeine consumption plays a crucial role in its effectiveness. Studies suggest that consuming caffeine after learning sessions, rather than before, may be more beneficial for memory consolidation . This post-study administration appears to specifically enhance the consolidation phase of memory formation without affecting the initial acquisition or retrieval processes.

In educational settings, particularly among students, caffeine is often used to combat fatigue and improve study efficiency. Its ability to enhance cognitive functions can be leveraged to optimize learning outcomes. However, it is essential to balance caffeine intake to avoid potential negative effects on health and cognitive performance.

Cognitive Function	Effect of Caffeine	Notes
Memory Consolidation	Enhances	Particularly effective when consumed post-study
Attention and	Increases	Beneficial during low arousal periods
Alertness		
Learning Efficiency	Improves	Optimal at moderate doses
Sleep Patterns	Disrupts	Excessive intake can impair sleep, affecting
		cognition
Anxiety Levels	May Increase	High doses can lead to heightened anxiety

Caffeine possesses properties that can be advantageous for learning and memory when consumed appropriately. Its role in enhancing cognitive functions makes it a valuable tool in educational contexts. However, mindful consumption is imperative to maximize benefits and minimize potential drawbacks

Discussion

Cyclic GMP (cGMP) phosphodiesterase (PDE) inhibitors are essential in therapeutic strategies for conditions like erectile dysfunction (ED) and cardiovascular diseases, as they work by preventing the degradation of cGMP. This second messenger plays a crucial role in promoting smooth muscle relaxation and vasodilation. The activity of a PDE inhibitor is reflected in its ability to inhibit the breakdown of cGMP, and in the case of the compound with a pa value of 0.648, its moderate inhibitory activity suggests that it may not be as potent as selective PDE5 inhibitors like sildenafil, but still has therapeutic potential. The pi value of 0.002 indicates that the compound is highly potent, able to exert significant effects at very low concentrations. This low value means that even small doses of the compound could significantly increase cGMP levels, promoting blood flow and muscle relaxation, which are critical for treating ED. In particular, such compounds could enhance vasodilation by elevating cGMP levels in tissues like the corpus cavernosum in ED patients. While this compound's pa value suggests moderate activity, its pi value demonstrates that it can achieve therapeutic effects with minimal dosing. This makes it a potential candidate for use in conjunction with

other therapies or as an alternative to more potent synthetic PDE5 inhibitors, which may have more side effects or be contraindicated in certain populations. The compound's ability to increase cGMP levels and its high potency at low doses also make it promising for other conditions like hypertension or other vascular diseases. Moreover, as a natural compound, it offers an advantage over synthetic drugs, potentially providing a safer and more cost-effective treatment option. However, further research is necessary to fully understand its mechanisms, optimal dosages, and long-term safety in clinical applications.

Conclusions and Recommendations

Conclusions

Caffeine, as a natural phosphodiesterase (PDE) inhibitor, shows promising potential for therapeutic applications, particularly for conditions like erectile dysfunction (ED) and other vascular disorders. The compound's ability to inhibit the degradation of cyclic GMP (cGMP) supports its role in promoting smooth muscle relaxation and vasodilation, essential for enhancing blood flow. The study's findings suggest that caffeine's pa value of 0.648 indicates moderate PDE inhibitory activity, while its pi value of 0.002 signifies high potency at low concentrations, making it a promising candidate for ED treatment and potentially other vascular conditions. Additionally, the fact that caffeine is widely accessible and relatively safe at moderate doses adds to its appeal as a cost-effective alternative to synthetic PDE5 inhibitors like sildenafil.

Recommendations

1. Further Research

Despite the promising results, more comprehensive studies are needed to better understand caffeine's molecular mechanisms in inhibiting cyclic GMP phosphodiesterase. Future research should explore:

- a. The specific PDE isoenzymes targeted by caffeine.
- b. The optimal dosing and administration methods for effective therapeutic outcomes.
- c. Long-term safety profiles and potential side effects at higher doses.

2. Clinical Trials

Controlled clinical trials should be conducted to validate the in vitro and epidemiological findings. These trials should assess:

- a. Caffeine's efficacy in different dosages for treating ED.
- b. Its interaction with other medications, particularly for patients with comorbidities such as cardiovascular diseases or hypertension.
 - c. The potential side effects and the overall impact on patient quality of life.

3. Exploring Other Natural Compounds

Given the broad potential of caffeine, it would be beneficial to explore other natural compounds with similar PDE inhibitory activities. A comparative study of various natural PDE inhibitors may provide additional, safer, and more effective alternatives for treating ED and other related conditions.

4. Public Health Implications

Promoting coffee as an accessible and affordable intervention could have significant public health implications, especially in populations with limited access to prescription medications. However, it is essential to balance the potential benefits with the known risks associated with excessive caffeine consumption..

REFERENCE

- Andersson, K. E. (2011). Mechanisms Of Penile Erection And Basis For Pharmacological Treatment Of Erectile Dysfunction. *Pharmacological Reviews*, 63(4), 811-859. https://doi.org/10.1124/pr.111.004515
- Azimi, P., Rezaei, N., & Azimi, H. (2020). Role of caffeine in the management of erectile dysfunction: A narrative review. *Andrologia*, 52(7), e13621. doi:10.1111/and.13621
- Cornelis, M. C. (2019). The Impact Of Caffeine And Coffee On Human Health. *Nutrients*, 11(2), 416. https://doi.org/10.3390/nu11020416
- Crippa, A., Discacciati, A., Larsson, S. C., Wolk, A., & Orsini, N. (2014). Coffee Consumption And Mortality From All Causes, Cardiovascular Disease, And Cancer: A Dose-Response Meta-Analysis. *American Journal of Epidemiology*, 180(8), 763-775. https://doi.org/10.1093/aje/kwu194
- Cui, Y., Shi, Z., Li, J., & et al. (2014). Caffeine Intake And Risk Of Erectile Dysfunction: A Pilot Study. *PLoS One*, 9(4), e95371. https://doi.org/10.1371/journal.pone.0095371
- Ding, M., Bhupathiraju, S. N., Chen, M., van Dam, R. M., & Hu, F. B. (2015). Caffeinated and decaffeinated coffee consumption and risk of type 2 diabetes: A systematic review and dose-response meta-analysis. *BMJ*, 351, h5358. doi:10.1136/bmj.h5358
- Fredholm, B. B., Bättig, K., Holmén, J., Nehlig, A., & Zvartau, E. E. (1999). Actions Of Caffeine In The Brain With Special Reference To Factors That Contribute To Its Widespread Use. *Pharmacological Reviews*, 51(1), 83-133. https://doi.org/10.1124/pr.51.1.83
- Giles, G. E., Mahoney, C. R., Brunyé, T. T., Gardony, A. L., Taylor, H. A., & Kanarek, R. B. (2017). Differential cognitive effects of energy drink ingredients: Caffeine, taurine, and glucose. *Pharmacology Biochemistry and Behavior*, 176, 97-103. https://doi.org/10.1016/j.pbb.2017.03.003
- Hatzimouratidis, K., Giuliano, F., Moncada, I., & et al. (2010). Guidelines On Male Sexual Dysfunction: Erectile Dysfunction And Premature Ejaculation. *European Urology*, 57(5), 804-814. https://doi.org/10.1016/j.eururo.2010.02.020
- Jananesetaste, (2024). Nusantara Delicate Daun Kopi Coffe Arabica 1 Leaf Powder 80 gr. Access: https://javanesetaste.com/nusantara-delicate-daun-kopi-coffee-arabica-l-leaf-powder-80gr/
- Kaya, E., & Sikka, S. C. (2019). Erectile dysfunction and aging: An overview. *Journal of Men's Health*, 15(2), e1–e7. doi:10.22374/1875-6859.15.2.1
- Kaya, E., & Sikka, S. C. (2019). Erectile Dysfunction In Diabetic Men: The Role Of Testosterone. *The Aging Male*, 22(2), 85-92. https://doi.org/10.1080/13685538.2018.1453100
- Mancini, M., & Vignozzi, L. (2021). Coffee and erectile dysfunction: A review of preclinical and clinical studies. *International Journal of Impotence Research*, 33(2), 139-150. https://doi.org/10.1038/s41443-020-0316-5

- McMahon, C. G. (2019). Erectile dysfunction. *Internal Medicine Journal*, 49(1), 11-19. https://doi.org/10.1111/imj.14112
- Nehlig, A. (2016). Effects Of Coffee/Caffeine On Brain Health And Disease: What Should I Tell My Patients?. *Practical Neurology*, 16(2), 89-95. https://doi.org/10.1136/practneurol-2015-001307
- Nehlig, A. (2018). Interindividual differences in caffeine metabolism and factors driving caffeine consumption. *Pharmacological Reviews*, 70(2), 384-411. https://doi.org/10.1124/pr.117.014134
- O'Keefe, J. H., DiNicolantonio, J. J., Lavie, C. J., & Coffee, R. (2018). Caffeine And Cardiovascular Health. *Progress in Cardiovascular Diseases*, 61(1), 54-61. https://doi.org/10.1016/j.pcad.2018.06.004
- Ribeiro, J. A., Sebastião, A. M., & de Mendonça, A. (2010). Adenosine receptors in the nervous system: Pathophysiological implications. *Progress in Neurobiology*, 86(6), 377–392. doi:10.1016/j.pneurobio.2008.09.002
- Selvin, E., Burnett, A. L., & Platz, E. A. (2007). Prevalence And Risk Factors For Erectile Dysfunction In The US. *American Journal of Medicine*, 120(2), 151-157. https://doi.org/10.1016/j.amjmed.2006.06.010
- Shamloul, R., & Ghanem, H. (2013). Erectile Dysfunction. *The Lancet*, 381(9861), 153-165. https://doi.org/10.1016/S0140-6736(12)60520-0
- Zhou, Y., Zhang, S., Liu, H., & et al. (2020). Coffee Consumption And Risk Of Cardiovascular Diseases And Mortality In Patients With Type 2 Diabetes: A Systematic Review And Dose-Response Meta-Analysis. *Diabetes Research and Clinical Practice*, 165, 108236. https://doi.org/10.1016/j.diabres.2020.108236