

#### Disorders of Desire

- Hypoactive sexual desire Characterized by low sexual interest. Must be distressing to patient.
- Sexual aversion (disorder) Characterized by absent sexual interest. Must be distressing to patient.
- Management, if necessary, will by psychotherapy. Because this is a disorder of desire, it may not be distressing to patient and therefore therapy may not be desired/necessary.

#### Disorders of Arousal

- Female sexual arousal disorder: Characterized by a failure to achieve adequate lubrication during sex. Often due to psychological causes – nervousness, fear, anxiety, etc.
  - Differential: Rule out usage of any kind of medications that may cause dryness, i.e., antihistamines and anticholinergics (most prominently diphenhydramine and ipratropium)
  - Management is to consider alternative medications (if cause), psychotherapy, and synthetic lubricants.
- (Male) Impotence: Characterized by a failure to achieve or maintain erection. Must rule out physiological causes. Ask patient if he has erection when he wakes up in the morning. If yes, you can rule out physiological causes.
  - Differential: Work-up patient for physiological causes, most prominently diabetes mellitus and peripheral vascular disease
  - Management is psychotherapy, may use sildenafil, tadalafil as pharmacotherapy

### Disorders of Orgasm

- Premature ejaculation syndrome Most commonly in teenage boys, young men. Characterized by ejaculation earlier than desired.
  - Management is sexual techniques such as the "squeeze" technique, may also use SSRIs (especially sertraline)

- Anorgasmia Recurrent or persistent inability to achieve orgasm.
  - Differential: Rule out SSRI use. If using SSRI, switch to bupropion.
  - Management is psychotherapy

## Disorders of Pain during Sex

- Dyspareunia Pain associated with sex, but NOT associated with lack of lubrication or other organic medical cause.
  - Differential includes female sexual arousal disorder, endometriosis, hypoplasia of the vaginal introitus, lichen sclerosis, candidiasis
  - Management is psychotherapy
- Vaginisumus Involuntary contraction of outer 1/3 of the vagina which results in pain during penile penitration
  - Management is techniques such as dilators, fingers, etc.

## Gender Dysphoria

- DSM-5: A marked incongruence between one's perpension experienced/expressed gender and assigned gender, of at least 6 months duration
- In children, may manifest as preponderance to play with toys associated with other sex, toilet habits associated with opposite sex, friends primarily of opposite sex, etc.
- Adults may get surgery to change outward appearance
- Can only diagnose if patient outwardly expresses disappointment with current or desire to be opposite sex.
  Cannot be diagnosed on behaviors alone.
- Management is psychotherapy or sexual reassignment

#### DIAGNOSIS AND DSM-5 CRITERIA

#### At least two of the following:

- A marked incongruence between one's experienced gender and primary/ secondary sex characteristics.
- A strong desire to be rid of one's primary/secondary sex characteristics because of the above.
- A strong desire for the primary/secondary sex characteristics of the other gender.
- A strong desire to be of the other gender.
- A strong desire to be treated as the other gender.
- A strong conviction that one has the typical feelings/reactions of the other gender.
- Clinically significant distress or impairment in functioning.

## **Paraphilias**

- Sexual arousal to objects, situations, and individuals, that is outside normative stimulation or what is considered to be acceptable.
- According to the AJP: "Recurrent, intense, sexually arousing fantasies, sexual urges, or behaviors generally involving:
  - Non-human objects (fetishism)
  - The suffering or humiliation of oneself or one's partner (masochism, sadism)
  - Children (pedophilia, ephebophilia)
  - Non-consenting persons (exhibitionism, frotteurism, voyeurism)
- Must cause distress to the patient, effect the patient's level of functioning, or break the law in jurisdiction
- Management, if necessary, is psychotherapy

## Paraphilias involving non-human objects

- Fetishism Sexual arousal from objects associated with the human body
  - Examples include specific garments of clothing, rubber and rubber items, footwear, and leather items
- Transvestic fetishism Sexual arousal from dressing or playing the role of the opposite sex

## Paraphilias involving suffering/humiliation

- Sadism Sexual arousal from inflicting pain on one's sexual partner
- Masochism Sexual arousal from receiving pain



## Paraphilias involving children

- Pedophilia Sexual arousal from intimate contact with or watching of prepubescent children
- Ephebophilia Sexual arousal from intimate contact with or watching of pubescent teens under the age of 18



# Paraphilias involving non-consenting persons

- Exhibitionism Sexual pleasure from exposure to unsuspecting strangers
- Frotteurism Sexual pleasure from rubbing up against unsuspecting strangers
- Voyeurism Sexual pleasure from spying on sexual or private acts of unsuspecting strangers