

Assessment of Sexual Dysfunctions in Female Patients Attending Psychiatry OPD

Ritu Meena¹, Sanjay Jain²

^{1,2}Department of Psychiatry at SMS Medical college, Jaipur, Rajasthan, INDIA
Corresponding Author: Ritu Meena

Abstract: Aims and objective:

To find out the pattern of sexual problem in female patients attending psychiatry OPD and to determine clinical correlation with various psychiatric disorder.

Material and Method :-

Study population consisted of 100 subjects which were assessed by using ICD 10 criteria ,specially designed Performa was applied on subjects, Hamilton Anxiety Rating Scale(HAM –A), Hamilton Depression Rating Scale(HDRS) for assessing anxiety and depression , Arizona Sexual Experience Scale (ASEX) for assessing the sexual dysfunctions respectively.

Result :-

Total 100 female subjects were interviewed after taken written consent form on the basis of inclusion and exclusion criteria. Out of 100 subjects 25 subjects were having sexual dysfunction. Most common age group with sexual dysfunctions were of 18-28 years 56%, 80% subjects were housewife and 72% were illiterate , Lack or loss of sexual desire was 84 % (most common), While Female sexual aversion 56 % ,Orgasmic disorder 48 % ,Dyspareunia 36 % ,Failure of vaginal lubrication 28 % and less common was Vaginismus 4 % .

Conclusion:-

This study demonstrates the need for increased awareness about female sexual dysfunctions.

Keywords: Female sexual dysfunction , Anxiety and Depression.

Date of Submission: 13-05-2019

Date of acceptance: 28-05-2019

I. Introduction

Women's sexual problems were cast as technical problems to be understood in terms of social phenomena and resolved through education regarding the profound physical , emotional and spiritual differences between men and women . sexual fulfilment was important for a happy marriage and by extension also for a healthy society. A Women's desires , on the contrary , are neither quickly aroused nor quickly satisfied¹.The epidemiological studies done on female sexual dysfunctions are very less due to which there is less data available on prevalence of sexual problems associated with female.²sexual response is a psychosomatic process, and both psychological and somatic processes are usually involved in the causation of sexual dysfunction³.Mental and sexual health of female is directly or indirectly depends on many factors which are as follows cultural , social , biological , psychological factors.⁴ The sexual dysfunctions are often not addressed by healthcare providers or patients due their shame , private and awkward nature.⁵ In India accurate figures are difficult to estimate.⁶To create awareness about sexual dysfunction in females is very important to reach the actual problem and diagnosis.⁷The disturbance in normal sexual response cycle is related with many psychosexual disorders .⁸ So there is a great need for research on female sexual dysfunctions, which ultimately effects the adult behavior.⁹

PSYCHOSEXUAL DYSFUNCTIONS ACCORDING TO ICD - 10:¹⁰

F 52.0 Lack or Loss of Sexual Desire

F 52.1 Sexual Aversion and Lack of Sexual Enjoyment

F 52.1-0 Sexual Aversion

F 52.1-1 Lack of Sexual Enjoyment

F 52.2 Failure of Genital Response

F 52.3 Orgasmic Dysfunction

F 52.5 Nonorganic Vaginismus

F 52.6 Nonorganic Dyspareunia

F 52 .8 Other Sexual Dysfunctions, not caused by organic disorder or disease

F 52.9 Unspecified sexual dysfunction, not caused by organic disorder

II. Material and Method

The present study was an observational, analytical and cross-sectional study. Study consisted of 100 married female subjects. Specially designed Performa for socio-demographic and clinical profile, Hamilton Depression Rating scale (HAM – D), Hamilton Anxiety Rating scale (HAM – A), Arizona Sexual Experience Scale (ASEX) were used for assessing the sexual dysfunctions. Subjects were assessed by using ICD 10 criteria. **Inclusion Criteria :-** 1). All married and sexually active female patients with age group of 18 years to 50 years 2) Who gave a written informed consent for participating in the study. 3) Those Meeting the criteria according to ICD-10. **Exclusion Criteria:-** 1) The cases below 18 years and above 50 years of age. And preexisting significant medical, gynecology, genitourinary, surgical, organic brain disorders & mental retardation, psychosis, bipolar disorder.

III. Result

Total 100 female subjects were interviewed after taken written a consent on the basis of inclusion and exclusion criteria. Out of 100 subjects 25 subjects were having sexual dysfunction. In Table 1 shown that most common age group was 18-28 years 56%, all subjects were married, most of the subjects were illiterate 72% and housewife 80%, all most all the subjects were Hindu 80% and belongs to rural background 88% and living in joint family 64%, most of the subjects came directly to OPD 48%, common problem was white discharge 44% and most common comorbidity was depression 40%. And out of 25 subjects 40% were having depression while 20% were having anxiety. In Table 2 shown the different types of sexual dysfunctions in female subjects out of all sexual dysfunctions Lack or loss of sexual desire was most common 28%, Female sexual aversion 24%, Failure of vaginal lubrication 20% while Orgasmic disorder 16% and vaginismus 14% were less common.

Table 1:- The above table shows socio-demographic and clinical profile of female subjects with psychiatric comorbidity

Age Group	(N=25)	%
18 – 28	14	56%
29– 40	11	44%
41– 50	1	4%
Marital Status		
Single		
Married	0	0
Education	25	25%
Illiterate	18	72%
Primary	01	4%
Middle	02	8%
Secondary	1	4%
College	0	0
University	3	12%
Housewife	20	80%
Unskilled/Semiskilled	03	12%
Skilled	01	4%
Religion		
Hinduism	20	80%
Islam	06	24%
Family		
Nuclear	09	36%
Joint	16	64%
Locality		
Urban	03	12%
Rural	22	88%
Referral		
Direct	12	48%
Dermatology	02	8%
Medicine	05	20%
OBS/GYNE	04	16%
TB CHEST	02	8%
Sexual Misconceptions : Related to vaginal discharge		
Vaginal discharge	11	
	8	
Physical Weakness	0	
Sexual Weakness	2	

Mental weakness		
Personal History		
H/O MASTURBATION	04 11	16% 44%
WHITISH DISCHARGE P/V		
Psychiatric comorbidity		
Anxiety	5 10	20% 40%
Depression	(n=15)	
Depression		
Mild	2	15.3%
Moderate	6	46.1%
Severe	5	38.4%
Very severe		
Anxiety		
Mild		
Moderate	2	66.6%
Severe		

Table 2 :- The above table showing the different types of sexual dysfunctions in female subjects

ICD 10 Code	Clinical Variable	Frequency N = 25	%
F52.0	Lack or loss of sexual desire	7	28%
F52.1	Female sexual aversion	6	24%
F52.2	Failure of vaginal lubrication	5	20%
F52.3	Orgasmic disorder	4	16%
F52.5	Vaginismus	3	12 %

IV. Discussion

The present study was conducted with aim to study the pattern of sexual problem in female patients attending psychiatry OPD. And to determine clinical correlation with various psychiatric disorder. The sample comprised of 100 female subjects. Out of 100 subjects 25 subjects were having sexual dysfunction. Most common age group was 18-28 years 56%, all subjects were married, most of the subjects were illiterate 72% and housewife 80%, all most all the subjects were Hindu 80% and belongs to rural background 88% and living in joint family 64%, most of the subjects came directly to OPD 48%, common problem was white discharge 44% and most comorbidity was depression 40%. Out of 25 subjects 40% were having depression while 20% were having anxiety. Types of sexual dysfunctions in female subjects out of all sexual dysfunctions Lack or loss of sexual desire was most common 28%, Female sexual aversion 24%, Failure of vaginal lubrication 20% while Orgasmic disorder 16% and vaginismus 14% were less common, while in other studies while in study done by Guha Thakurta et.al.,2014, females total dysfunction was present in 51.28% (N=39) of the subjects, orgasmic dysfunction was the most frequent dysfunction 20.51% followed by desire which was 15.38%.¹¹ Another study by Şenol Turan et.al.,2015 found that anorgasmia was 51.2%.¹²

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Ritu Meena. "Assessment of Sexual Dysfunctions in Female Patients Attending Psychiatry OPD." IOSR Journal of Dental and Medical Sciences (IOSR-JDMS), vol. 18, no. 5, 2019, pp 58-61.