

INTRA VAGINAL LATENCY TIME IN HEROIN DETOXIFIED PATIENT

MUHAMMAD HARIS KHAN BURKI bb
MBBS ,PhD FECSM
.KHALIQ UR RAHMAN,FECSM
SIDRA ASHAR MSC

INTRODUCTION:

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- For long time opium has been used to treat premature ejaculation and prolong sexual pleasure .In almost all heroin detoxified patients IVLT is acutely reduced. Chronic form of these withdrawals effects can last from 6 months to couple of years. This reduced IVLT can be a cause of relapse .Since there are no standard guidelines for these patients we are first one to provide.

METHOD:

- An internet search was made using key words premature ejaculation, opioid withdrawal , pharmacological effects of heroin to understand neurochemical basis of reduced IVLT during drug withdrawals.

RESULTS:

- There is paucity of literature regarding neurochemical basis of drug withdrawal in general and reduced IVLT in particular.

Discussion

- Active neurochemical changes during withdrawal and their relevance to IVLT.
- CALCIUM CHANNEL
- Heroin has blocking effect on calcium channels. These voltage gated channels open up during withdrawals. This causes hyper excitation of neurons and muscles. Tense pelvic muscle and irritable nerves are factors in premature ejaculation.
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- **Pregablin ,Gabapentine,Bacl ofen,Nimodipine, as blocker of calcium channels can be helpful both for withdrawals and comorbid PME.**

SEROTONERGIC SYSTEM

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- During addiction serotonergic system undergoes specific adaptation which result in compulsive drug use behavior. There is no conclusive result about serotonergic activity during abstinence period. Acute heroin intake enhance serotonergic activity. However chronic use decrease serotonergic tone. SSRI are given in heroin detoxified patient to stabilize mood and control impulsivity, SSRI act on paraventricular nucleus to inhibit orgasm, **Depoxetine** given on PRN basis in PME patient. .It is extremely potent SSRI. In heroin abstinent patients it may given on daily basis.

DOPAMINE SYSTEM

- During active opiod intake there is increase of dopamine release in nuclus accumben. In abstinence period lower dopamine is avialable due to down regulation of dopamine receptors and reduce transporter avialability.e of dopamine. Dopamine agonist can help restore pleasure in detoxified patient. But these may not be helpful to increase IVLT in these patient. As dopamine play facilitatory role in orgasm. Dopamine antagonist can be counter productive as they inhibit reward center

NORADRENALIN SYSTEM

- Heroin inhibit non adrenaline in locus coeruleus. When heroin is stopped there is increased firing causing withdrawal symptoms like sweating nervousness and insomnia. Elevated nor epinephrine may be predisposing factor of substance abuse. **Prazosin clonidine, tizanidine. alfuzazone** can be helpful. Alpha recptor mediate orgasmic reflex and overactive alpha receptors if blocked can increase IVLT.

LOCAL ANASTHETICS

- **Drugs like lignocain SS cream can be added in treatment .Dorsal penile neurectomy can decrease hyper sensitivity can help increase IVLT.**
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- **CONCLUSION: Treatment of short IVLT can**
- **improve prospects of heroin abstinent patients.**

Thank you

