TREATMENT OF SEXUAL DYSFUNCTION AND OCD : *A PARADOX*

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INTRODUCTION:

There is high prevalence of sexual dysfunction in drug naïve OCD patients. They tend to have greater orgasmic and erectile difficulties. 50% of OCD patients have sexual dysfunction. Between 60% to 73% have dissatisfied sexual lives. Anorgasmia was found in 24.2% and sexual avoidance in 60.6%of OCD female patients.

SSRI, s used for treatment of OCD further impair sexual functions. It induces lack of libido, orgasmic difficulty and erection and lubrication problems. This class of drug reduces dopamernergic transmission at meso limbic circuit and increase of prolactin level which has dampening effect on sexual function. It also cause desensitization of erotogenic zones of body. Sexual dysfunction is reported in 80% of SSRI,s treated patients.

There are pharmacological and psychological options. Strategies we can use are psychotherapy, drugs with minimum SD, and add drugs to undo sexual side effects. CBT can be used for treatment of OCD which can pass by SSRI,s. Simultaneously sex therapy can be used including CBT, masturbation, mindfulness techniques. Concomitant treatment of OCD and sexual dysfunction is a challenging task.

In pharmacological treatment we can adopt two strategies

MEDICATION THAT CAN LOWER OCD SCORES WITH MINIMUM SEXUAL SIDE EFFECTS

ADD ON MEDICATION TO UNDO SEXUAL SIDE EFFECTS

MIANSERIN and MIRTAZEPINE

Miaserin can be given to stabilized OCD patient. When mianserin was added to female patients there was no change in OCD symptoms .However undesirable sexual side effect were greatly reduced. Study on male patient has shown similar results of reversing SSRI induced sexual side effects.

When mirtazepine is added to citalopram for treatment of there was early onset of response along with reduction of sexual side effect. Mirtazepine has antagonist effect on 5HT2A/5HT2C/5HT3 and alpha 2 receptors.

ANTI GLUTAMETERGIC MEDICINE

KETAMINE

Glutamine play important role in patho physiology of OCD. Randomized trail show efficacy of ketamine which is a non competitive NMDA receptor antagonist. It could achieve rapid anti obsessional effect without involvement of serotonergic system.

MEMENTINE

Drug used in treatment of dementia belong to NMDA receptor antagonist. When added to fluvoxamine improved outcome of OCD treatment without additional side effects. Memtentine can help reduce dose of SSRI which would improve sexual function.

LAMOTRIGINE

Used as antiepileptic and mood stabilizer can be used as augmentation therapy for resistant OCD. Lamotrigine has few sexual side effect can help I dose reduction of SSRI,s in OCD patients.

VILAZEDONE

Vilazedone is has combine properties of SSRI and partial agonist of pre and post synaptic 5HT1A.It has minimum sexual side effect because 5HT1A can modify dopamine transmission .Agonism of this receptor can decrease inhibitory effect on dopamine release.

Modification of 5HT receptor can modulate glutamate transmission via 5HT1A ,5HT1B,5HT3,5HT7.It is possible to use combination of drugs to enhance anti OCD with out additional sexual side effects.

N acetyle cystine

N acetyle cystine can augment antiobsessional effect SSRI.This particular molecule has prosexual central and peripheral effect. It has anti oxidant, anti inflammatory, dopamenergic , anti glutamertegic and homocystien lowering properties. Combine effect improves vascular health through endothelial function. Central effect help improve neurotransmitter synthesis.

PDE5 inhibitor

Although PDE5I don,t have no role to play in CNS function. Yet can help OCD patients. Due to their safe and potent effect on arousal can counter sexual side effect of SSRI,s. This improves compliance of medication. Improved sexual function helps improve mood and add to general well being of patient.

CONCLUSION:

For comprehensive treatment of OCD treatment sexual function need to be addressed properly. So many time sexologist find obsessive patient presenting with sexual symptom. So both sexologist and psychiatrist have to evolve strategy to deals two separate problems concomitantly.