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ORIGINAL ARTICLE

# Sexual dysfunctions in Tunisian patients with schizophrenia



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## KEYWORDS

Schizophrenia;  
Sexual dysfunctions;  
Quality of life;  
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## Summary

**Introduction.** – Sexuality in patients with schizophrenia is often overlooked. Very few studies examined sexual dysfunctions in such patients, especially in Tunisian socio-cultural context. The objective of this work was to assess sexual dysfunctions in Tunisian patients with schizophrenia. **Methods.** – A survey was conducted between August 8 and September 5, 2011 among consultants at departments of psychiatry ‘E’ and ‘F’ in Razi Mental Health Hospital in Mannouba, Tunisia. All consultants with schizophrenia, aged between 18 and 60, who were sexually active during the period of the study, were included. Sexual dysfunctions were assessed using the Changes in Sexual Functioning Questionnaire (CSFQ) translated to Arabic dialect.

**Results.** – Thirty-eight patients were included. Sexual dysfunctions prevalence was 71% ( $n=27$ ) with no difference by sex. These figures are higher than those of the general population and are consistent with previous studies using the CSFQ. The average number of sexual dysfunctions was 3.8 per patient. There was no between-gender difference. The most frequent dysfunction was sexual pleasure dysfunction (50%;  $n=19$ ). The presence of sexual dysfunctions was significantly associated with early onset of schizophrenia, with high scores on the PANSS, with long acting antipsychotics, with high doses of antipsychotics, with the number of prescribed psychotropic medications and with good insight.

**Conclusions.** – This study contributes to a better understanding of sexuality in patients with schizophrenia. Clinicians should consider sexual dysfunctions in these patients and discuss with them potential solutions to improve their quality of life and adherence to therapy.

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## Introduction

Often perceived as purely instinctual, considered as a taboo or simply denied, sexuality in patients with schizophrenia has long been excluded from clinical reflection and physicians tend to overlook or disregard sexual dysfunction

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during the psychiatric evaluation of patients with schizophrenia.

Furthermore, studies performed in Arabic socio-cultural context are extremely scarce. Given the heavy influence of social norms and cultural heritage on sexuality, sexual life features in Tunisian patients with schizophrenia probably differ from those in Western cultures. An appropriate study was, hence, needed.

The aim of this work was to assess sexual dysfunctions in Tunisian patients with schizophrenia and to examine possible relationships with clinical and therapeutic factors.

## Patients and methods

A cross-sectional descriptive study was conducted between August 8, 2011 and September 5, 2011 at departments of psychiatry "E" and "F" in Razi Mental Health Hospital in Mannouba, Tunisia.

Consultants with schizophrenia according to the criteria of the Diagnostic and Statistical Manual of Mental Disorders (DSM) IV, aged between 18 and 60, clinically stabilized and sexually active during the period of the study (i.e. at least one month before assessment) were included. Eligible patients gave their informed consent to participate in the study and the protocol was approved by the ethical committee of Razi hospital.

Patients with medical conditions that could interfere with sexual function and women during the peri- or post-menopausal period were excluded from the study.

Sexual dysfunctions were assessed by the Changes in Sexual Functioning Questionnaire (CSFQ) (Clayton et al., 1997), including 36 items for men and 35 items for women, translated to Tunisian Arabic dialect. It is a structured questionnaire designed to measure illness and medication related changes in sexual functioning.

CSFQ was not validated in patients with schizophrenia but it was already used in several studies performed in such patients (Acuña et al., 2010; Clayton et al., 1997; Fan et al., 2007; Kelly and Conley, 2003; Liu-Seifert et al., 2009; Montejo et al., 2010).

The CSFQ is an interviewer-administered questionnaire. It assesses sexual function through five domains corresponding to the phases of the sexual response cycle as defined by the DSM-IV. These domains are: desire/frequency, desire/interest, sexual pleasure, sexual arousal and orgasm.

It also comprises a specific section comparing current sexual functioning with previous sexual functioning before schizophrenia onset.

The clinical evaluation was based on the Positive and Negative Syndrome Scale (PANSS).

Patients' insight was assessed by the G12 "lack of judgment and of awareness" item of the PANSS.

Demographic and clinical features were evaluated using a semi-structured interview and using the medical file (age, level of education, job, marital status, age of schizophrenia onset, illness duration, and treatment).

## Results

Sixty-two patients with schizophrenia were admitted during the period of the study. Sexual dysfunctions were searched in patients who were sexually active during at least one month before assessment. There were 38 patients included in this study (22 men and 16 women). The mean age was 35.7 years. Patients had an average of 8.9 years of education. Three quarters of the patients interviewed were jobless. The mean duration of the disease was 10.4 years. The mean age of onset was 21.2 years.

The global rate of sexual dysfunctions (at least one sexual dysfunction) was 71% ( $n=27$ ). There was no significant difference between genders ( $P=0.3$ ).

The average number of sexual dysfunctions was 3.8 per patient. It was similar in men (3.5) and in women (3.9).

The types and rates of sexual dysfunctions according to gender are reported in Table 1.

The most frequent sexual disorder concerned sexual pleasure subscale (50%).

Patients who reported current sexual dysfunctions ( $n=27$ ) were asked about the onset of their sexual dysfunctions. Only 7.4% ( $n=2$ ) said it occurred before schizophrenia onset while 92.6% ( $n=25$ ) said they had no sexual disorders before schizophrenia.

Nonetheless, previous sexual functioning assessing using a specific section of the CSFQ showed that sexual dysfunctions were present even before schizophrenia onset (low pleasure and sexual hypo-activity) in 26% of patients currently suffering from sexual dysfunctions.

The presence of sexual dysfunctions was correlated with an early onset of the disease (17.5 years old versus 28.5 years old;  $P=0.03$ ).

**Table 1** Types of sexual dysfunctions according to gender.

SD according to CSFQ	Men ( $n=22$ )	Women ( $n=16$ )	Total ( $n=38$ )	<i>P</i>
Desire/frequency	5 (22.7%)	9 (56.2%)	14 (36.8%)	0.04
Desire/interest	6 (27.2%)	10 (62.5%)	16 (42.1%)	0.03
Pleasure	12 (54.5%)	7 (43.7%)	19 (50%)	0.8
Excitation	12 (54.5%)	6 (37.5%)	18 (47.3%)	0.5
Orgasm	11 (50%)	6 (37.5%)	17 (44.7%)	0.9
Global score	9 (40.9%)	7 (43.7%)	16 (42.1%)	0.5
Absence of SD	6 (27.3%)	5 (31.3%)	11 (29%)	0.7

$P=0.3$ ; SD: sexual dysfunctions; CSFQ: Changes in Sexual Functioning Questionnaire.

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