Clinical Outcomes of a New Self-Help Booklet for Premature Ejaculation

Philippe Kempeneers, MS, MA,*†‡ Robert Andrianne, MD, PhD,‡§ Sabrina Bauwens, MA,‡ Isabelle Georis, MA,‡ Jean-François Pairoux, MS,‡¶ and Sylvie Blairy, MS, PhD‡**

*Department of Public Health Sciences, University of Liege, Liege, Belgium; †Alexians' Hospital, Henri-Chapelle, Belgium; †BibliothEP Project, Liege, Belgium; *Department of Urology, University of Liege, Liege, Belgium; *Specialized Hospital Center, Lierneux, Belgium; **Department of Psychology: Cognition and Behavior, University of Liege, Belgium

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ABSTRACT-

Introduction. Premature ejaculation (PE) is quite common. Although effective treatments do exist, only a few affected people consult a practitioner in order to overcome their problem. At the same time, studies have shown that reading didactical documents about their PE problem (bibliotherapy) can be useful to men.

Aim. The aim of this study was to improve the bibliotherapy approach using up-to-date knowledge and techniques. The expected benefits were the following: (i) an effective manual shorter than previous ones; (ii) easier to assimilate therapeutic principles; and (iii) a method thereby made accessible to a broad population most of whom usually do not consult for this type of sexual problem.

Method. A short bibliotherapy titled *The Practical Guide of PE* [in French] was tested among PE subjects who were diagnosed with PE according to Diagnostic and Statistical Manual of Mental Disorders, fourth edition, text revision criteria. Assessments were made at baseline (N = 421), at 4–8 months (N = 120), and at 10–14 months (N = 79) after they read *The Practical Guide*. A control group of 66 subjects was left on a waiting list and was assessed 2 months after baseline. **Main Outcome Measures.** The main outcome measures are self-reported ejaculatory latency time, feeling of control upon ejaculation, sexual satisfaction, distress related to PE, anxiety experienced during sexual intercourse, and sexual cognitions (Sexual Irrationality Questionnaire).

Results. Significant improvements were found for all the self-reported parameters, both at 4–8 and at 10–14 months after the bibliotherapy. The improvements were associated with an adjustment of sexual cognitions. The response to treatment seemed better for those subjects with moderate PE. Although the severity criteria used in this study did not precisely meet the International Society for Sexual Medicine criteria for lifelong PE, they were likely related. The response did not seem to be affected by variables such as age, education, or personality.

Conclusion. Its cost/benefit ratio makes *The Practical Guide* a valuable therapeutic tool. Kempeneers P, Andrianne R, Bauwens S, Georis I, Pairoux J-F, and Blairy S. Clinical outcomes of a new self-help booklet for premature ejaculation. J Sex Med 2012;9:2417–2428.

Key Words. Premature Ejaculation; Bibliotherapy; Self-Help Book; Cognitive-Behavior Therapy; Treatment; Anxiety; Sexual Cognitions; Sexual Health; Ejaculatory Latency Time

Introduction

The purpose of the present study, called BibliothEP, was to improve a bibliotherapy

'The word *BibliothEP* is a contraction of the word *bibliotherapy* and the acronym *EP* for "Ejaculation Précoce" ("Premature Ejaculation" in French). The University of Liege (Belgium) and the Province of Liege Department of

approach to the problem of premature ejaculation (PE) based on up-to-date techniques, the efficacy of which has been advocated previously by Kempeneers et al. [1].

Health and Quality of Life (Belgium) collaborated on leading this study. It received the Best Presentation Award 2010 from the Association Française de Thérapie Comportementale et Cognitive (AFTCC).

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PE is a very common disorder. Its estimated prevalence is around 20–30% of the male population, depending on the study. However, although effective treatments do exist [2,3], few affected people consult a practitioner about their problem: around 15% [4] to 18% [5]. The reasons for these low numbers might include embarrassment at discussing the problem and a lack of information about available treatments [4,6]. Bibliotherapy thus represents a useful option for treatment.

Research into cognitive-behavioral treatments showed that reading didactic documents about the problem might help PE men improve their condition. Such an approach is called "bibliotherapy." In 1975, Lowe and Mikulas performed the first test of a bibliotherapy for PE [7]. The authors reported an improvement rate of 100% but in a small sample of only 10 subjects. The self-help book used in this study was never published. A second bibliotherapy developed by Zeiss and Zeiss (p. 159) [8] was tested by Zeiss himself in 1978 [9] and by Trudel and Proulx in 1987 [10]. Only Trudel and Proulx found significant improvements, but once again in a very small sample (N = 15). These bibliotherapies were based on a classical behavioral approach developed by Masters and Johnson [11] and primarily focused on stop-start techniques. More recently, De Sutter et al. [12] tested a selfhelp book (p. 311) written by De Carufel and De Sutter (alias Carr and Sutter) [13] and based on alternate techniques to regulate the escalation of sexual arousal in order to keep it below a threshold of uncontrollability. These regulation techniques were first proposed by Desjardins in 1985 [14] and have been developed by De Carufel since 1996 [15,16]. Using Carr and Sutter's book, De Sutter and colleagues reported a lengthening of selfreported latency in 75% of the 64 users. The significance of the improvement was controlled for by comparing it with outcomes for subjects remaining on a waiting list without treatment. Using the same bibliotherapy, Jurysta and De Sutter found similar results in 116 subjects with both PE and an erectile disorder [17].

Carr and Sutter's bibliotherapy, which was clearly effective, mostly depended on regulating techniques. Nevertheless, the method described derived from an original therapeutic protocol spread out over about a dozen face-to-face 30-minute interviews. This bibliotherapy was presented as a novel of more than 300 pages, in which a mass of sexological information and recommendations were diluted by a romantic intrigue. We thought that this formula might not be optimal for

easy and widespread use and we were convinced that it was possible to improve the approach. De Sutter et al. did not provide any information about the 25% of the subjects that did not report an improvement or about those (N = 53) that quit the protocol [12]. However, one cannot exclude the possibility that the format of this self-help book might not have been easy to use for some people, for example, those reluctant to read novels or those who needed concise and a straightforward overview.

In 2004, Kempeneers et al. argued that, compared with the classical cognitive-behavioral format focusing on stop-start techniques, the regulating approach had better theoretical validity and was easier to apply [1]. They also suggested simplifying the therapeutic protocol by focusing it on those elements thought to be most effective. Essentially, these included the following: (i) cognitive intervention to help people free themselves from an overvaluation of coitus as a way of providing pleasure and (ii) behavioral training to thwart a rapid escalation of sexual arousal by using specific self-masturbatory and breathing exercises and by integrating the principle of breaks. Therefore, one might assume that a short bibliotherapy synthesizing these essential components of the regulating method would be at least as efficacious as previous self-help books on PE and would certainly be easier to use.

Aim

The aim of the present study was to improve the bibliotherapy approach by using up-to-date techniques, the effectiveness of which was assumed [1]. The expected benefits were to obtain the following: (i) an efficient manual shorter than previous ones; (ii) with therapeutic principles easier to assimilate; and, therefore, (iii) a method made accessible to a large public, notably to those men who usually do not consult with a professional for help with this type of sexual problem.

Material and Method

The Practical Guide of PE

A short bibliotherapy named *The Practical Guide of PE* [in French] was developed [18].

In 41 A5 format pages, the booklet described some essential processes involved in PE and proposed some exercises for learning to manage sexual arousal and thereby delay ejaculation. It also provided some food for thought about generally

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