

Mating Strategies and Sexual Functioning in Personality Disorders: A Comprehensive Review of Literature



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ABSTRACT

Introduction: Personality disorders impair several aspects of intrapsychic and interpersonal life. In particular, mating strategies and sexual functioning could manifest in different and/or dysfunctional ways in people with personality disorders.

Aim: To describe, through a comprehensive review of the literature, the mating strategies and sexual functioning in patients with personality disorders.

Methods: We listed and discussed the principal studies on the relation between mating strategies and sexual functioning in personality disorders. The search strategy used search terms in PubMed for the main studies published from January 2000 to December 2016.

Main Outcome Measures: We considered two main sections for our selection according to the aim of the present review: mating and sexuality.

Results: Interesting evidence on mating strategies in personality disorders was found. In particular, the major items were found in the dramatic-unpredictable cluster, with borderline personality disorder being the most studied. In contrast, the bizarre-eccentric cluster had fewer items, with the schizoid personality disorder being the least studied. For sexual behavior, borderline personality seems to be the unique disorder sufficiently studied, with evidence of major histories of child sexual abuse, the presence of sexual dysfunctions, and paraphilic interests.

Conclusion: A large spectrum of mating strategies characterizes different personality disorders, although an inconsistent knowledge about the relation between sexual function and personality disorders emerged from our analysis of the literature. Hence, we invite clinicians and researchers to integrate psychodiagnostic and sexual assessments in psychiatric disciplines for people with personality disorders. **Collazzoni A, Ciocca G, Limoncin E, et al. Mating Strategies and Sexual Functioning in Personality Disorders: A Comprehensive Review of Literature. Sex Med Rev 2017;5:414–428.**

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INTRODUCTION

Personality disorders (PDs) can be defined as patterns of behavior and inner experiences that negatively affect an individual's life, because these individuals have strayed from their cultural expectations.¹ This pattern is pervasive and stable and begins during adolescence and young adulthood. The *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision* (DSM-IV-TR)¹ defines three specific personality disorder clusters. Cluster A, defined as “bizarre-eccentric,” is formed by paranoid, schizoid, and schizotypal characteristics. Cluster B, defined as “dramatic-unpredictable,” is formed by antisocial, borderline, histrionic, and narcissistic disorders. Cluster C,

defined as “anxious-fearful,” is formed by avoidant, dependent, and obsessive-compulsive disorders (OCDs). The disorder remains stable over time and increases social, work, and interpersonal malfunctioning. These subdivisions were for the most part maintained and confirmed in the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (DSM-5).²

Toward a Comprehensive Approach

People with PDs suffer intensely and dramatically and find difficulties in conducting and developing a normal life and creating satisfactory and adequate relationships. The importance of interpersonal functioning in PDs also has been emphasized in the DSM-5.² A healthy personality is defined based on two interpersonal skills: empathy for others (eg, individuals are capable of understanding others’ experiences, motivations, and perspectives and can predict the consequences of their own and others’ actions) and intimacy (individuals can create and maintain close, caring, and reciprocal relationships in their personal and community life). These characteristics seem to be less prevalent in those with PDs than in healthy people.³

In particular, intimacy is a determinant in mating (eg, in the creation of an intimate and sexual alliance between men and women), which can lead to the procreation of offspring.⁴ Furthermore, in healthy people, some differences in the mating strategy have been observed, and these differences depend on the considered point of view.⁵ Based on an evolutionary viewpoint, women might prefer to be more cautious than men in engaging in short-term relationships because of the investment in offspring.⁶ According to the same evolutionary viewpoint, men prefer to engage in sex more often than women and they are less interested in investing in a long-term relationship. In contrast, according to a social role explanation, women can explore their sexuality in the context of committed relationships. This behavior also can assure an evolutionary benefit, because it could help women avoid the risks of unwanted pregnancies, reputational compromise, and sexually transmitted infections.⁶

This rigid view does not always respect reality. Women can engage in risky short-term relationships with Machiavellian men for several reasons, such as adaptive reasons (to get better genes for their offspring, mate switching, or to gain access to more resources and protection) and personal psychological factors (testing mate value).⁷ The choice for short-term mating of women can be viewed as “strategic,” because it also depends on the women’s current fertility status.⁷ Men and women might begin long-term and romantic relationships for socioemotional support and economic and social benefits,⁸ whereas the motivation for casual sex is more likely to be sexual gratification.⁶ Moreover, the choice of a partner might depend on the avoidance of the partner’s negative factors but not on the positive factors (in women particularly). Thus, sex seems to determine mating strategy differences across evolutionary, social, and psychological points of view.

A genetic view also seems to contribute to the understanding of the factors determining whether a young adult will fall in love.⁹ Genetic variants also contribute to the formation of romantic relationships. A love relationship is associated with serotonin levels in the brain, and the *5-HT1A* gene (C-1019G, rs6295) polymorphism is significantly associated with the odds of being single, even when adjusting for several personal and social factors.¹⁰ According to previous studies, some genes could encode for serotonin receptors and then be connected to some personality traits favoring love relationships.

In this regard, sexual functioning and sexual behavior play a fundamental role not only in mating and intimacy but also in general health and quality of life and many psychological aspects, such as personality influence and sexuality. For example, many studies have pointed to the relation between emotion regulation and sexual dysfunctions; alexithymia is related to erectile dysfunction, premature ejaculation, vaginismus, and a lack of desire.^{11–13} These premises suggest there is no precise way to understand and study mating, the generation of intimate relationships, and sexual functioning, although several factors could influence them.

Impossible or Possible Questions?

One interesting question focuses on the relation among PD, mating, and sexual behaviors. Some investigators have suggested that mating and the sexual difficulties of those with PDs are connected to the symptoms and could represent symptoms.^{14–19} However, the state of the art about the intimate and sexual problems in those with PDs has not been described. An assessment of individual mating strategies and sexual behaviors should provide additional information on PD characteristics and should improve the understanding of their interpersonal functioning.

METHODS

Search Strategies

The main methodology for this review consisted of a careful analysis of the literature focused on the mating and sexuality of people with PDs. Therefore, we considered the main original studies and review articles concerning the link among PDs, mating strategies, and sexual functioning.

A computerized search was performed to identify all relevant studies in PubMed from January 2000 to December 2016. The following search terms were used: “romantic relationships” OR “love relationships” OR “intimate relationships” OR “mating” OR “sexual functioning” OR “sexual dysfunctions” OR “sexual desire disorders” OR “erectile dysfunction” OR “poor lubrication” OR “vaginismus” OR “premature ejaculation” OR “orgasmic disorders” AND “personality disorders” OR “paranoid personality disorder” OR “schizoid personality disorder” OR “schizotypal personality disorder” OR “antisocial personality disorder” OR “narcissistic personality disorder” OR “borderline

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