

Sexual dysfunction in female psychiatric patients

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To explore this topic, its relationship with personality characteristics, marital adjustment and sexual hormonal levels. Tools used were: Sexual history 2-General Health Questionnaire (GHQ) Assessment of sexual function using CSFQ. Assessment of marital adjustment using global version of MSI. Assessment of personality PAS. DSFI modified extracted version. Sex hormone level measurement. The most common sexual dysfunctions are desire disorders, orgasmic dysfunction, arousal disorder, dyspareunia and lastly vaginismus. The most common psychiatric disorders in these patients are (mood-anxiety-somatoform-adjustment) disorders. There was high rate of circumcision, manual hymenal perforation in wedding night, discrimination in favor of males, earlier onset of marriage and first information about sex from the family. Psychiatric patients had low (sexual drive, sexual attitude, sexual satisfaction, orgasmic capacity, desire frequency and total sexual functioning) plus more dependent personality disorder than others. Psychiatric patients show more sexual dysfunction, personality pathology and marital dissatisfaction than others. There is a high rate of overlap between different sexual disorders in the same patients. Testosterone is positively correlated with sexual desire and orgasm.