

MEN SEXUAL DYSFUNCTION IS ONE OF EMBARESMTNT OF HUMAN WRIGHTS OF WOMEN

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INTRODUCTION

Sexual dysfunction

Definition

Sexual dysfunction is broadly defined as the inability to fully enjoy sexual intercourse. Specifically, sexual dysfunctions are disorders that interfere with a full sexual response cycle. These disorders make it difficult for a person to enjoy or to have sexual intercourse. While sexual dysfunction rarely threatens physical health, it can take a heavy psychological toll, bringing on depression, anxiety, and debilitating feelings of inadequacy (1) . It is a common disorder all over the world especially in developed countries and is described previously by Ibne -Sina (1) .

Description

Sexual dysfunction takes different forms in men which include (1 , 2):-

Erectile dysfunction: an impairment of the erectile reflex. The man is unable to have or maintain an erection that is firm enough for coitus or intercourse.

Premature ejaculation: rapid ejaculation with minimal sexual stimulation before, on, or shortly after penetration and before the person wishes it.

Ejaculatory incompetence: the inability to ejaculate within the vagina despite a firm erection and relatively high levels of sexual arousal.

Retarded (retrograde) ejaculation: a condition in which the bladder neck does not close off properly during orgasm so that the semen spurts backward into the bladder.

Causes and symptoms

Many factors, of both physical and psychological natures, can affect sexual response and performance. Injuries, ailments, and drugs are among the physical influences; in addition, there is increasing evidence that chemicals and other environmental pollutants depress sexual function. As for psychological factors, sexual dysfunction may have roots in traumatic events such as rape or incest, guilt feelings, a poor self-image, depression, chronic fatigue, certain religious beliefs, or marital problems. Dysfunction is often associated with anxiety. If a man operates under the misconception that all sexual activity must lead to intercourse and to orgasm by his partner, and if the expectation is not met, he may consider the act a failure . Erectile dysfunction is more likely than other dysfunctions to have a physical cause. Drugs, diabetes (the most common

physical cause), Parkinson's disease, multiple sclerosis, and spinal cord lesions can all be causes of erectile dysfunction. When physical causes are ruled out, anxiety is the most likely psychological cause of erectile dysfunction (1,2,3) .

Diagnosis

The first step in diagnosing a sexual dysfunction is usually discussing the problem with a doctor, who will need to ask further questions in an attempt to differentiate among the types of sexual dysfunction. The physician may also perform a physical exam of the genitals, and may order further medical tests, including measurement of hormone levels in the blood. Men may be referred to a specialist in diseases of the urinary and genital organs (urologist), and primary care physicians may refer women to a gynecologist (1,4,5) .

Treatment

Treatments break down into two main kinds: behavioral psychotherapy and physical. In cases where significant sexual dysfunction is linked to a broader emotional problem, such as depression or substance abuse, intensive psychotherapy and/or pharmaceutical intervention may be appropriate (1,5,6,7,8) .

Possible medical treatments include:

Clomipramine and fluoxetine for premature ejaculation.

Papaverine and prostaglandin for erectile difficulties .

Viagra, a pill approved in 1998 as a treatment for impotence.

Prognosis

There is no single cure for sexual dysfunctions, but almost all can be controlled. Most people who have a sexual dysfunction fare well once they get into a treatment program (1,2,5) .

The aim of the present study is to evaluate the troublesome of men sexual dysfunction on the human wrights of women and children .

PATIENTS AND METHODS

Hundred male patients with sexual dysfunction were seen in a private clinic in baquba city , for the period Sep. 2009 to Sep. 2011 . Their ages ranged from 20-60 years , with a mean age of 36years . They were presented with sexual dysfunction (impotence)of variable duration , ranged from one month to two years , the patients were divided into two groups according to their age :

- 1. Group-1** : consisted of 50 patients (50%) , their ages ranged from 20-40 years , all of them look healthy with

sexual dysfunction of about one sexual activity (intercourse) monthly , most of them had some psychological upset such as anxiety , depression and emotional troubles .

- 2. Group-2** : also consisted of 50 patients (50%) , their ages ranged from 41-60 years , 10 patients were diabetic , treated by oral hypoglycemic agents and 15 were hypertensive and on hypotensive therapy , they had sexual dysfunction , with one sexual activity every 2-3months , also most of them had some psychological troubles .
- 3. A third group** : consisted of 30 well , healthy and sexually active individuals , with at least one sexual activity daily or every other day , their ages ranged from 20-50years .

All patients were treated by 50-100mg sildenafil gel or tablets orally on need and some sort of psychotherapy .

RESULTS

The study revealed that the sexual dysfunction especially the erectile dysfunction (impotence) was relatively not uncommon

problem in young and middle age Iraqi men .

1. **Group-1** : which represent 50% of patients , young , healthy with out systemic diseases, with one sexual activity monthly and most of them had some psychological trouble , including anxiety , depression , obsessive disorders and emossional disorders , which may be the cause of sexual dysfunction or the result of it .
2. **Group-2** : also represent 50% of patients , of middle age , 20% diabetic on oral hypoglycemic agents and 30% were hypertensive , on oral antihypertensive therapy , 50% of them were healthy without any systemic diseases , they had sexual dysfunction (impotence) , with one sexual activity every 2-3months , most of patients even those with systemic organic diseases had some psychological disorders , which may be the cause or the end result of erectile dysfunction .

On clinical assessment all patients in both groups had sexual dysfunction (impotence) , in comparison with the control group , who were healthy , psychologically weal and with normal sexual activity . The patients had some sort of psychiatric disorders , most commonly anxiety , depression obsessive and personality disorders , which was reflected negatively on sexual activity and development of impotence , which aggravate the psychological status of the patient and

development of vicious cycle . This sexual dysfunction may result in deprivation of relationship between the husband and his wife , which may be an embarrassment of human wrights of women and children , reflected as divorce , loss of children , infertility and suicidal attempts . All patients with out organic diseases in both groups shows improvement on sildenafil.

DICUSSION

Results of this study was similar to other studies through the world (1). According to the evidence (**sex is a psyche**), in which there is a direct and strong relationship between the psychological stat of the men and the sexual function, so any disturbance in psychological status e.g. anxiety, emotional stress and depression may result in sexual dysfunction, most commonly erectile dysfunction (impotence) (3) .

In Iraq , due to the aggressive changes that occurs after forging occupation , which result in the development of many of the psychiatric disorders and later on sexual dysfunction , which cause embarrassment of human wrights of the women and children , including infertility , divorce and suicidal attempts .

In conclusion, sex is a psyche, so when your psyche is good, your sexual functions is very good and Vera versa and this is may be reflected on human wrights of the women and children.

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الفشل الجنسي للرجال هو احد العوامل المهددة لحقوق النساء

المقدمة:-

الفشل الجنسي عند الرجال هو عدم القدرة على الأداء والتمتع بالعملية الجنسية بشكل جيد وهو ذو تأثير محدود على الوظائف العضوية، لكنه ذو تأثير واسع ومباشر على الفعاليات والوظائف النفسية للرجال والتي تشمل الكآبة والقلق وفقدان القدرة والحيوية. مسببات الفشل الجنسي قد تكون عضوية او نفسية وان المسببات النفسية هي المؤولة عن الغالبية العظمى لهذا الفشل. إن الفشل الجنسي يتمثل بأحد او عدد من الفعاليات التالية وهي العنة، تأخر او سرعة القذف، الجماع المصحوب بالألام أو فقدان الرغبة الجنسية. الهدف من الدراسة هو الوقوف على المشاكل التي تتسبب الى النساء والأطفال بسبب الفشل الجنسي للرجال والتأثيرات التي تنتج عن هذا الفشل على حقوق الإنسان للنساء والأطفال.

المرضى:-

شملت الدراسة مائة مريض من الرجال معدل أعمارهم ٣٦ سنة يعانون من الفشل الجنسي بسبب العنة، ولفترات تراوحت بين شهر واحد إلى سنتين ولفتره من أيلول ٢٠٠٩ إلى أيلول ٢٠١١. تم تقسيم المرضى الى مجموعتين في كل منهما خمسون مريض، وكذلك مجموعة سيطرة من الرجال الأصحاء بدنياً و"جنسياً" وتكونت من ثلاثين رجل. تم علاج المرضى بعقار الفياكرا (٥٠-١٠٠ ملغم).

النتائج:-

أظهرت نتائج الدراسة بان الفشل الجنسي لدى الرجال هو من الأمراض تراوحت أعمارهم بين (٤١-٦٠ سنة) حيث يمارسون الجنس بمعدل مرة واحدة كل شهرين إلى ثلاثة أشهر. بينما مجموعة السيطرة تراوحت أعمارهم بين (٢٠-٥٠ سنة) حيث يمارسون الجنس يوميا" أو بين يوم وآخر. شبه الشائعة نسيباً في الرجال العراقيين في ديالى. حيث يعاني منه جميع الفئات العمرية من عمر (٢٠-٦٠ سنة). المجموعة الأولى من عمر (٢٠-٤٠ سنة) حيث يمارسون الجنس

بمعدل مرة واحدة شهرياً" وهم ٥٠% من مجموع المرضى، بينما المجموعة الثانية

المناقشة:-

هذه الدراسة مطابقة إلى دراسات أخرى وكما هو على الفرد العراقي ، وهذه بدورها تنعكس على حقوق الإنسان للنساء والأطفال وبشكل مباشر حيث ينتج منها المشاكل العائلية بين الرجل وزوجته والتي قد تؤدي إلى الطلاق والافتراق وبالتالي التشرذم للعائلة والأطفال ومحاولات الانتحار او حتى الانتحار والفساد الخلقي للمجتمع وانتشار الرذيلة وضياع الأطفال اللذين هم الثروة الأساسية لمستقبل البلد العلمي والاقتصادي والعقائدي. مسجل في دول العالم الأخرى حيث توجد علاقة وشيجة بين العملية الجنسية والحالة النفسية للرجال، حيث ان أي اضطراب نفسي مثل القلق، الكآبة وغيرها قد تؤدي إلى الفشل الجنسي عند الرجال، وان مسببات الاضطراب النفسي قد تكون ناتجة عن اضطراب الأوضاع الاجتماعية والمعيشية والثقافية للرجال بسبب الاحتلال الأجنبي وما تبعه من أضرار إنسانية وأخلاقية واجتماعية

الاستنتاج:-

الجنس مزاج فإذا اضطرب المزاج لأي سبب كان حصل الفشل الجنسي والذي ينعكس سلبياً" على حقوق الإنسان للمرأة والطفل وبالتالي المجتمع جميعاً".