

INHIBITED SEXUAL DESIRE DISORDER

Definition

Inhibited sexual desire (ISD) refers to a low level of sexual interest. A person with ISD will not start or respond to their partner's desire for sexual activity.

ISD can be primary (in which the person has never felt much sexual desire or interest), or secondary (in which the person used to feel sexual desire, but no longer does).

ISD can also relate to the partner (the person with ISD is interested in other people, but not his or her partner), or it can be general (the person with ISD isn't sexually interested in anyone). In the extreme form of sexual aversion, the person not only lacks sexual desire, but may find sex repulsive.

Some of the common causes of sexual dysfunction are:

- unskilled or uncaring partner
- communication problems
- anxiety, depression or fear
- a gynecologic disease
- deep-seated psychological problems
- prior history of sexual abuse



Sometimes, the sexual desire is not inhibited. The two partners have different sexual interest levels, even though both of their interest levels are within the normal range.

Someone can claim that his or her partner has ISD, when in fact they have overactive sexual desire and are very demanding sexually.

Alternative Names

Sexual aversion; Sexual apathy; Hypoactive sexual desire

Causes

ISD is a very common sexual disorder. Often it occurs when one partner does not feel intimate or close to the other.

Communication problems, lack of affection, power struggles and conflicts, and not having enough time alone together are common factors. ISD also can occur in people who've had a very strict upbringing concerning sex, negative attitudes toward sex, or traumatic sexual experiences (such as rape, incest, or sexual abuse).

Illnesses and some medications can also contribute to ISD, especially when they cause fatigue, pain, or general feelings of malaise. A lack of certain hormones can sometimes be involved. Psychological conditions such as depression and excess stress can dampen sexual interest.

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Commonly overlooked factors include insomnia or lack of sleep, which lead to fatigue. ISD can also be associated with other sexual problems, and sometimes can be caused by them. For example, the woman who is unable to have an orgasm or has pain with intercourse, or the man who has erection problems (impotence) or retarded ejaculation can lose interest in sex because they associate it with failure or it does not feel good.

People who were victims of childhood sexual abuse or rape, and those whose marriages lack emotional intimacy are especially at risk for ISD.

Symptoms

The primary symptom is lack of sexual interest.

Exams and Tests

Most of the time, a medical exam and lab tests will not show a physical cause.

However, testosterone is the hormone that creates sexual desire in both men and women. Testosterone levels may be checked, especially in men who have ISD. Blood for such tests should be drawn before 10:00 a.m., when male hormone levels are at their highest.

Interviews with a sex therapy specialist are more likely to reveal possible causes.

Treatment

Treatment must be targeted to the factors that may be lowering sexual interest. Often, there may be several such factors.

Some couples will need relationship or marital therapy before focusing on enhancing sexual activity. Some couples will need to be taught how to resolve conflicts and work through differences in nonsexual areas.

Communication training helps couples learn how to talk to one another, show empathy, resolve differences with sensitivity and respect for each other's feelings, learn how to express anger in a positive way, reserve time for activities together, and show affection, in order to encourage sexual desire.

Many couples will also need to focus on their sexual relationship. Through education and couple's assignments, they learn to increase the time they devote to sexual activity. Some couples will also need to focus on how they can sexually approach their partner in more interesting and desirable ways, and how to more gently and tactfully decline a sexual invitation.

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Problems with sexual arousal or performance that affect sexual drive will need to be directly addressed. Some doctors recommend treating women with either cream or oral testosterone, often combined with estrogen, but there is no clear cut evidence yet.

Outlook (Prognosis)

Disorders of sexual desire are often difficult to treat. They seem to be even more challenging to treat in men. For help, get a referral to someone who specializes in sex and marital therapy.

Possible Complications

When both partners have low sexual desire, sexual interest level will not be a problem in the relationship. Low sexual desire, however, may be a sign of the health of the relationship.

In other cases where there is an excellent and loving relationship, low sexual desire may cause a partner to feel hurt and rejected. This can lead to feelings of resentment and make the partners feel emotionally distant.

Sex is something that can either bring a relationship closer together, or slowly drive it apart. When one partner is much less interested in sex than the other partner, and this has become a source of conflict, they should get professional help before the relationship becomes further strained.

Prevention

One good way to prevent ISD is to set aside time for nonsexual intimacy. Couples who reserve time each week for talking and for a date alone without the kids will keep a closer relationship and are more likely to feel sexual interest.

Couples should also separate sex and affection, so that they won't be afraid that affection will always be seen as an invitation to have sex.

Reading books or taking courses in couple's communication, or reading books about massage can also encourage feelings of closeness. For some people, reading novels or watching movies with romantic or sexual content also can encourage sexual desire.

Regularly setting aside "prime time," before exhaustion sets in, for both talking and sexual intimacy will improve closeness and sexual desire.