

350 Desire to distress: unveiling the hidden burden of antidepressant induced sexual dysfunction

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Introduction

- 11.4% of US adults used anti-depressants in 2023
- An increasing number of patients report long-term symptoms after discontinuation of antidepressants (e.g. SSRIs, SNRIs, and TCA) known as post SSRI sexual dysfunction (PSSD).
- Symptoms include persistent sexual dysfunction, cognitive impairment, mood changes, and other systemic effects.

Objective

This study aims to characterize the demographic, sexual, psychological, and systemic features of individuals reporting PSSD through a cross-sectional questionnaire-based analysis.

Methods

Anonymous Qualtrics survey was distributed via online support forums and social media platforms (e.g. who X, Reddit, Facebook) targeting individuals over the age of 18 who reported persistent symptoms post antidepressant usage.

Results

- 380 respondents** that met eligibility criteria, 65.3% male, 34.7% female
- Average age** at start of Antidepressant: 23.95 (8.4)
- Race:** Asian (6.3), Black (2.9%), Hispanic/Latino (4.5%), Middle Eastern or North African (3.7%), White (76.3%), Mixed race (6.1%)
- Countries:** United States (35.3%), Canada (7.6%), Europe (34.7%), and 18 other countries (21.8%)
- Prior knowledge** of sexual side effects before starting respective drug; Yes: 12.9%, **No: 83.9%**, I don't recall: 3.2%

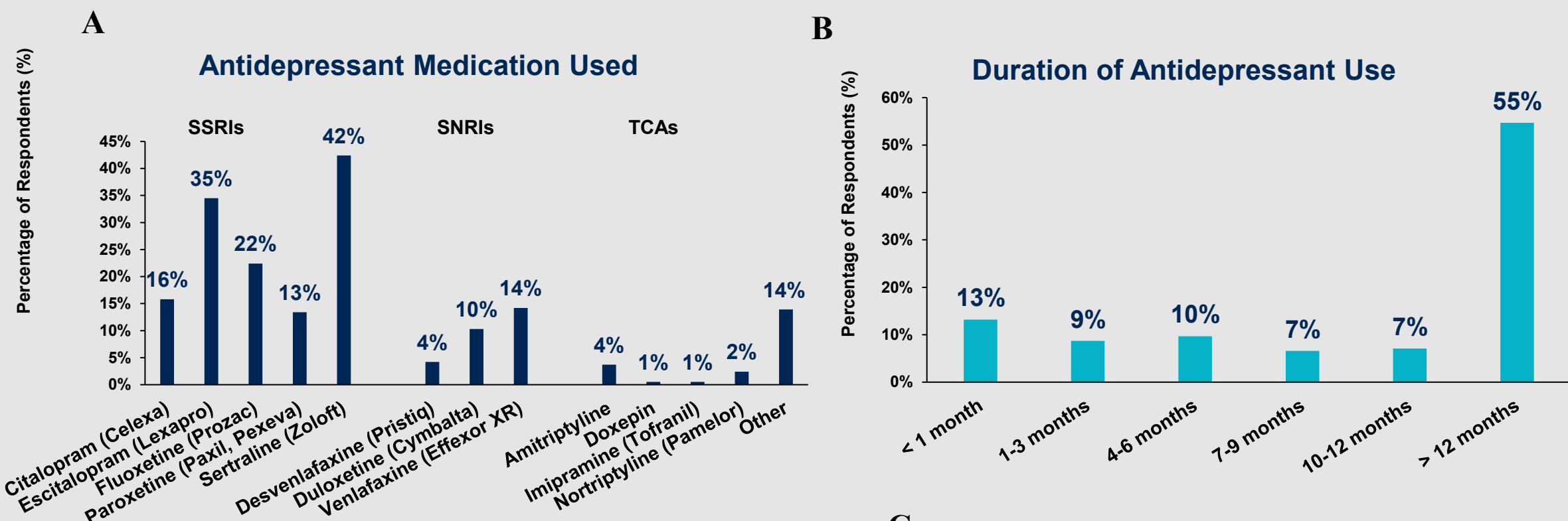


Figure 1: SSRIs were the most commonly used medication. The majority of patients used antidepressants for greater than 1 year, stopping due to side effects. Study participations were asked what medication(s) they have used, therefore, are not mutually exclusive (A). Participants were also asked the duration of their treatment (B) and the reason for discontinuing (C).

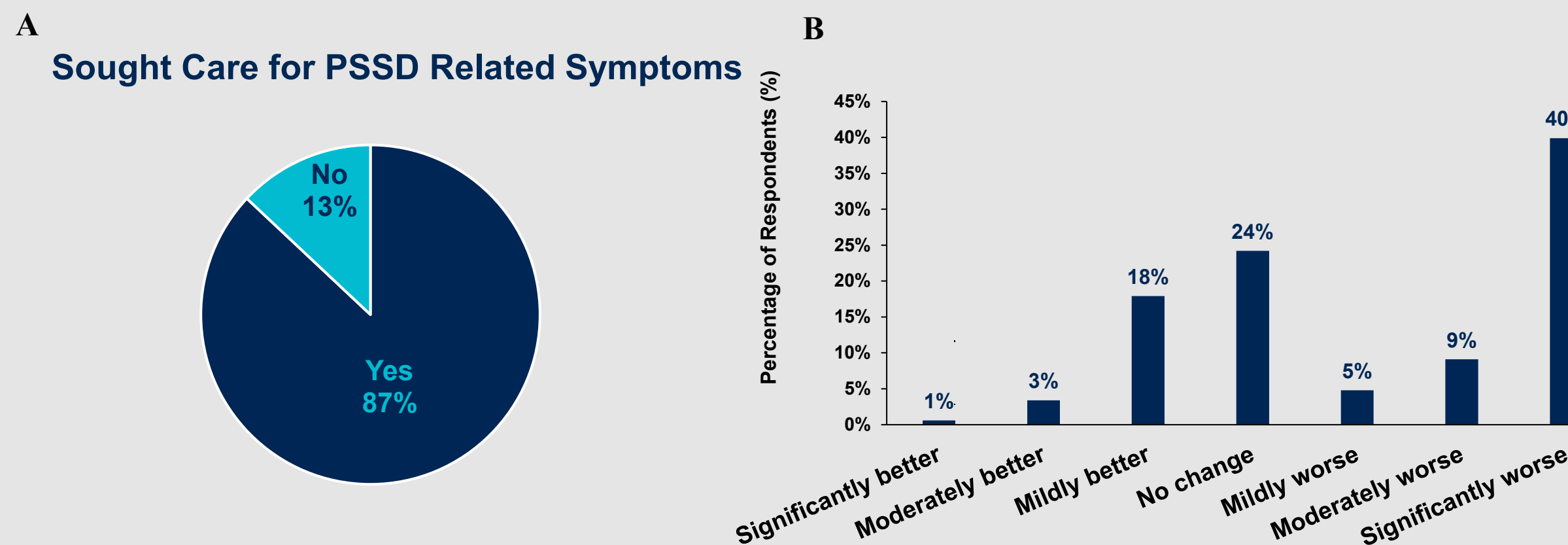


Figure 2: Following discontinuation of Antidepressant therapy, majority of respondents experienced no change or a worsening of their symptoms. The majority of patients sought care from a medical professional following discontinuation of Antidepressant therapy. (A) Study participants were asked how their sexual symptoms change during the therapy and after discontinuation. (B)

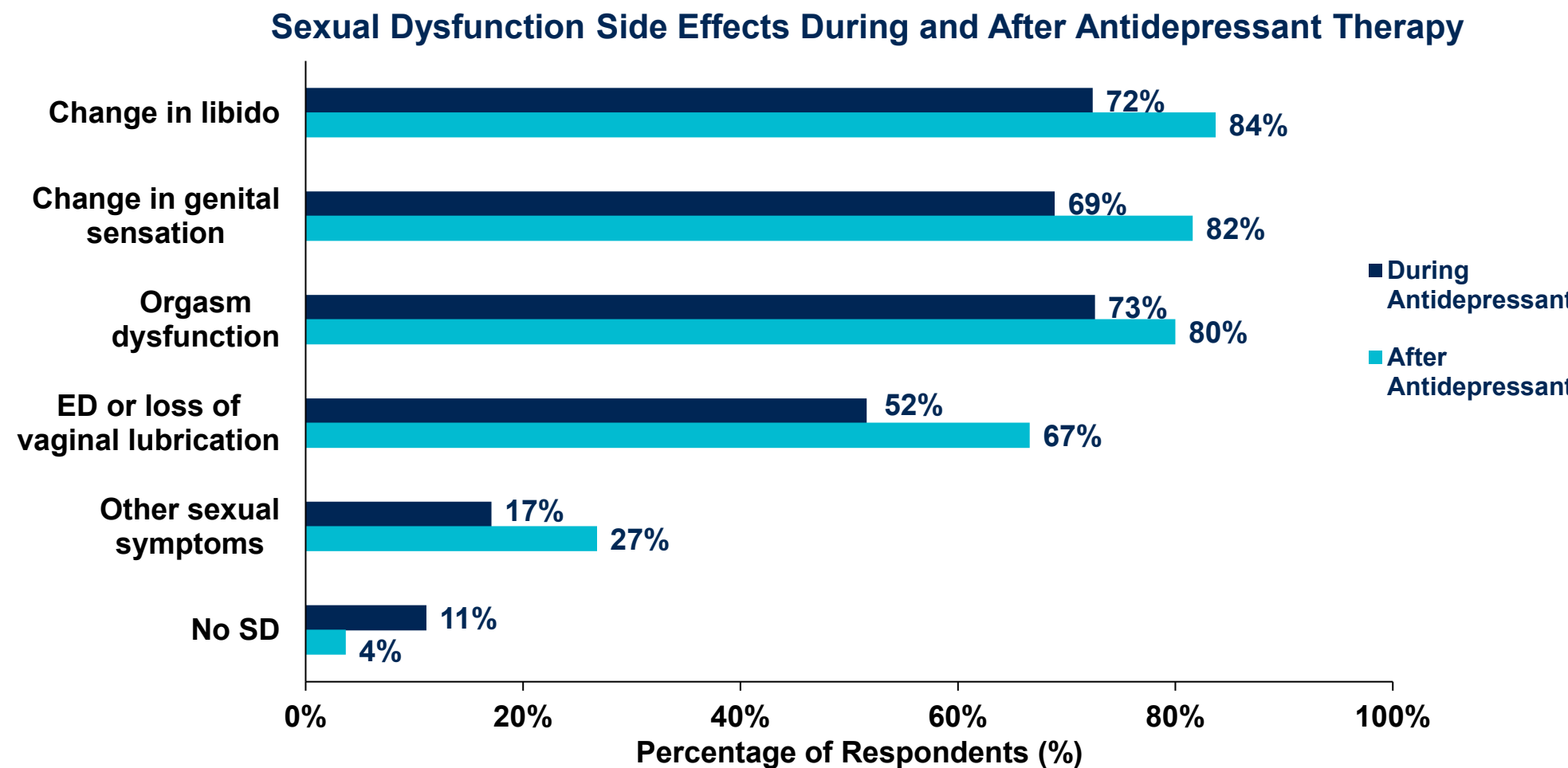


Figure 3: Sexual side effects increased following discontinuation of antidepressant therapy. Study participants were asked if they experienced any side effects related to sexual dysfunction, and what type of sexual dysfunction either during antidepressant therapy or after discontinuation of antidepressant therapy.

Other symptoms	N=380	Bladder changes	119 (31.3%)
Cognitive impairment	270 (71.1%)	Bowel changes	129 (33.9%)
Mood changes	206 (54.2%)	Visual changes	134 (35.3%)
Skin changes	129 (33.9%)	Difficulty getting pregnant or fertility issues	19 (5.0%)
Joint pain	81 (21.3%)	Other symptoms*	158 (41.6%)
Loss of/reduction in previous hobbies/interests	261 (68.4%)	No other symptoms	30 (7.9%)

Table 1: 92% of study participants reported non-sexual symptoms believed to be related to Antidepressants. *Hair changes (loss, dry more body hair), dry mouth/eyes/lips, rapid aging, fatigue, headaches, muscle pain/weakness, pain, voice changes, hearing issues, neuropathy, anhedonia, reduced appetite

Conclusion

Following the discontinuation of antidepressants (SSRIs, SNRIs, TCAs) there is a high prevalence of sexual dysfunction known as PSSD. Informed consent in the potential side effects leading to PSSD remains low. These findings highlight the importance of patient counseling, monitoring, and interdisciplinary collaboration in managing antidepressant related side-effects.