



Indian Journal of Clinical Psychiatry

(Official publication of Indian psychiatric Society- UP branch)

In this issue.....

EDITORIAL

When The Whole World was Witnessing COVID-Crisis...A New Chapter Began
Vipul Singh, Sujit Kumar Kar

The Slippery Slope of Editing : Balanced Perspectives for Initiating a New Biomedical Journal
Debanjan Banerjee, T. S. Sathyanarayana Rao

PERSPECTIVE

A Private Psychiatric Specialty Hospital in Kanpur – Some Initial Experiences
R. K. Mahendru

Mental Health in U.P. - Last Fifty Years
A. K. Agarwal

A Kaleidoscopic View of Substance Use in Uttar Pradesh
Pranob Kumar Dalal and Kopal Rohatgi

NGO's and Their Role in Mental Health Care in India
Shashi Rai, Bandna Gupta

Suicide in Uttar Pradesh : An Overview
Shivangini Singh and Teena Bansal

REVIEW ARTICLE

COVID-19 Chaos and New Psychoactive Substances: New Threats and Implications
Kumari Rina, Sujita Kumar Kar, Susanta Kumar Padhy

Mental Health Issues in Covid and Post Covid-19 Scenario: The Way Forward
Tapas Kumar Aich, Amil H Khan, Prabhat Kumar Agrawal

Psychiatrists in The State of Uttar Pradesh: The Iconic Professionals
S. C. Tiwari, Nisha Mani Pandey

Werther's Effect: A Brief Review
Rakesh Yaduvanshi, Anurag Agrawal, Chinar Sharma

Immune-inflammatory Pathways in Somatoform-Disorders : A Theoretical Update
Vikas Menon, Natarajan Varadharajan, Selvaraj Saravanan

1 46

VIEW POINT

Attributes of Distress Among Healthcare Workers Infected with COVID-19

Sujita Kumar Kar, Akanksha Shankar, Sudhir Kumar Verma, Parul Verma, Rahul Kumar, Suyash Dwivedi, Anand Kumar Maurya and Rajnish Kumar

7 51
9
12
18

ORIGINAL ARTICLE

Sexual Openness and Sexual Dysfunction in Indian Women: A Qualitative Approach
Jyoti Mishra, Nitin Gupta and Shobit Garg

21 60

CASE REPORT

Cannabis Induced Psychotic Disorder in Cannabis With-drawal During COVID-19 Lockdown : A Case Report
Dhana Ratna Shakya, Sandesh Raj Upadhaya

25 65

COVID-19 : Depression & Psychogenic Erectile Dysfunction
Raghav Gupta, Pranahith Reddy and Kishore M.

30 69

Art & Mental health : Perspectives of The Mind
Pawan Kumar Gupta and Aditya Agarwal

36 71

ABSTRACTS

41 73

COVID-19 : Depression & Psychogenic Erectile Dysfunction

Raghav Gupta¹, Pranahith Reddy² and Kishore M.³

¹Psychiatry Resident, JSS Medical College And Hospital , Mysuru, Email id- raghavrajindergupta14@gmail.com

²Psychiatry Resident, JSS Medical College And Hospital , Mysuru, Email id- pranahith@gmail.com

³Associate Professor of Psychiatry, JSS Medical College, JSSAHER, Mysuru, Email id- kishorem@jssuni.edu.in

TO THE EDITOR,

COVID-19 outbreak is a pandemic and global health emergency that directly impacts the physical and mental health of the global population. Commonly reported mental health problems due to COVID-19 are depression, anxiety, insomnia, loneliness, boredom, avoidance, defence responses, and maladaptive behavior [1]. During the height of the COVID-19 outbreak, overall sexual activity, frequency, and risk behavior declined significantly among men and women in China [2]. Sexual disorders are rarely reported during COVID-19; however, they compromise equally psychosocial health and quality of life. Here, we report Psychogenic Erectile Dysfunction with depression presented during COVID-19 to tertiary care general hospital.

A 31-year-old male, studied up to 10th class, migrant daily wage worker from lower-middle socioeconomic status, married for 18 months, from urban area presented with the chief complaint of difficulty of erection for last six months. Informed consent from the patient was taken, and the patient reported that he was well for nearly one year after marriage. The patient-reported that his married life was alright and his wife was pregnant three months after marriage but had an abortion due to unexplained reason in her eighth month of pregnancy. This event coincided with the lockdown in India in early April 2020. After the abortion, they continued sexual intercourse, but the patient initially had a decrease in interest along with erection difficulty. Problem with erection, the frequency increased progressively and worsened during the lockdown period. The patient lost his work in the meantime. After losing work due to the COVID-19 pandemic, the patient complained of stress, staying idle at home throughout the day with the family's financial crisis, leading to a loss of interest in daily

activities. Even when he had a desire for sexual intercourse, he had erection difficulty. The patient tried using sildenafil citrate from the chemist shop without any consultation, but symptoms persisted. The patient developed a feeling of guilt and sadness. He began to feel tired and fatigued whenever he tried to have sexual intercourse, and fatigue persisted even on the next day. Sleep and appetite were normal. Spouse corroborated history. On physical & genital examination, no abnormalities were detected. The patient was investigated; a complete blood count and lipid profile was done, which came out to be normal. The patient had a high score on the HAM-D (Hamilton Rating Scale for Depression). The patient was diagnosed with Psychogenic Erectile dysfunction with Moderate depression. He was prescribed a Selective Serotonin Reuptake Inhibitor (SSRI) Tab. Sertraline 50 mg once a day. He was educated, and supportive psychotherapy was given. Follow up was advised. He reported significant improvement after 15 days.

This case has to be understood based on the complex interaction of COVID-19 pandemic, depression, and Erectile Dysfunction. Erection in males has physiological and psychological aspects responding to emotional stimuli controlled by the brain's limbic system. Erectile Dysfunction is a recurrent and persistent inability to have/maintaining sufficient penile erection for satisfactory sexual intercourse [3]. Psychiatric illnesses like anxiety, depression, excessive stress, etc., can cause psychogenic erectile dysfunction where an imbalance in neurotransmitters like noradrenalin is involved [4]. COVID 19 pandemic has also played a significant role in causing severe stress in individuals beyond health and economic factors, further affecting sexual wellbeing and intimacy among couples. Social isolation and the fear of getting COVID-19 infection have greatly affected relationships and couples living separately for various reasons. During COVID-19 lockdown, increased stress was recorded with frequent interpersonal conflicts, hostility, poor communication, impatience, lack of privacy, and negative perceptions, further affecting the wife-husband relationship [5].

Corresponding author:

Dr Kishor M

Email : kishorm@jssuni.edu.in, Ph.: 9686712210

Patients being migrant workers may have faced much uncertainty about changing situations like economic crisis, fear about intimacy, safe sexual practices to prevent transmission of the virus, and misconceptions circulating in social media. Adding to this patient's wife had a termination of pregnancy due to the fetus' non-viability, which is a major traumatic event for a young couple causing significant distress. In depression, the patient can develop decreased self-esteem and negative thoughts, leading to decreased libido or performance anxiety, causing a decreased erection. Depression also affects the HPA axis (Hypothalamo-Pituitary-Adrenal), leading to increased catecholamines leading to insufficient cavernosal muscle relaxation. Anxiety further increases the patient's focus on the firmness of erection leading to self-consciousness and cognitive distraction during the act, and the patient further develops a fear of the next sexual encounters. Sexual dysfunction in one partner affects the couple as a whole, causing significant distress and interpersonal issues, further aggravating the problem.

When erectile dysfunction (ED) coexists with anxiety and depression, mood disorder treatment should be prioritized. Treating with antidepressants, preferably Selective Serotonin Reuptake Inhibitor (SSRI) and non-

pharmacological management include psychoeducation to the couple, supportive psychotherapy, couple therapy is beneficial [6]. Lifestyle modifications like aerobic activity, weight loss, dietary changes, yoga, meditation, and quitting substance use are useful. Maintaining social distance, using a face mask, frequent hand washes while being at work, risk reduction counseling, and safe sexual practices with known partners will help sexual wellbeing during the COVID-19 pandemic.

REFERENCES

1. Talevi D, Socci V, Carai M, Carnaghi G, et al. Mental health outcomes of the COVID-19 pandemic. *RivPsichiatri.* 2020;55(3):137-44.
2. Li W, Li G, Xin C, Wang Y, et al. Challenges in the Practice of Sexual Medicine in time of COVID-19 in China. *J Sex Med* 2020;17:1225-1228
3. Rew KT, Heidelbaugh JJ. Erectile dysfunction. *American family physician.* 2016;15;94(10):820-7.
4. Yafi FA, Jenkins L, Albertsen M, Corona G et al. Erectile dysfunction. *Nature reviews Disease primers.* 2016; 4;2(1):1-20
5. Lopes GP, Vale FB, Vieira I, da Silva Filho AL et al. COVID-19 and sexuality: reinventing intimacy. *Archives of Sexual Behavior.* 2020;49(8):2735-8.
6. Banerjee D, Rao TS. Sexuality, sexual well being, and intimacy during COVID-19 pandemic: An advocacy perspective. *Indian journal of psychiatry.* 2020;62(4):418.