

Use of a vibrating device in the management of female situational anorgasmia: Prospective case series study in women from South eastern Spain

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Introduction

Around 40 percent of women in Spain are unable to achieve orgasm during coital relations, although most can do so through other means. Many of these women do not seek treatment, even though this situation may affect their sexual and relational life. Female Orgasm Disorder (FOD) treatment has seen little innovation since the 1980s. The growing acceptance, technological

development, and focus on diversity have contributed to the flourishing of the sex toy industry. This sector has enabled the development of therapeutic devices that have already demonstrated usefulness in addressing other female and male sexual dysfunctions, often making treatments more Accessible. However, more scientific studies are needed on this topic.

Aim

Present the results of the utility and safety of using a vibrating device in the management of

situational female orgasm disorder (FOD) in a group of women from South eastern Spain.

Method

A case report study of an observational, descriptive, prospective nature, involving 19 women undergoing treatment, that meet criteria for lifelong, situational FOD from the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) was conducted in Murcia, Spain, from January 2022 to July 2023. Patients were 18 years or older, generally healthy as evidenced by medical history, were sexually active, in a current relationship of 3 months or longer, and participation was voluntary. Patients did not meet criteria for PTSD, psychosis or dissociative disorders, depression or bipolar disorders, were not pregnant or in menopause and did not use drugs known to interfere with sexual functioning. Main outcome measures were assessed using the Female Sexual Function Index (FSFI) domain for orgasm at baseline and after 6 and 12 weeks, as well as the success rate of achieving orgasm during coital relations.

Treatment consisted of an educational session where a vibrating device called Crescendo II® and its accompanying resource of different positions, Play Book, was provided, along with instructions for using the device during coital relations.



Figure 1.
Crescendo device by Mysteryvibe
Crescendo is designed to be all about the person using it. It can be bent with the hands so that the person using it can give it the shape they desire.



Image 1.
Mysteryvibe playbook used for the treatment with examples of how to use it properly.

Results

Patients had a mean age of 31.19 years (range 27-53). An improvement was observed in the average scores at six and twelve weeks in FSFI orgasmic domain, (mean pre = 1.62 (SD) = 0.42, mean post six weeks = 3.47 (SD) = 1.26, mean post twelve weeks = 3.43 (SD) = 1.25). The success rate (orgasm achievement during intercourse) at the end of the study was 90.47%.

Figure 2.
This histogram shows the age range of clinical test participants, with a majority of participants in the 20-35 age bracket, indicating a young adult cohort.

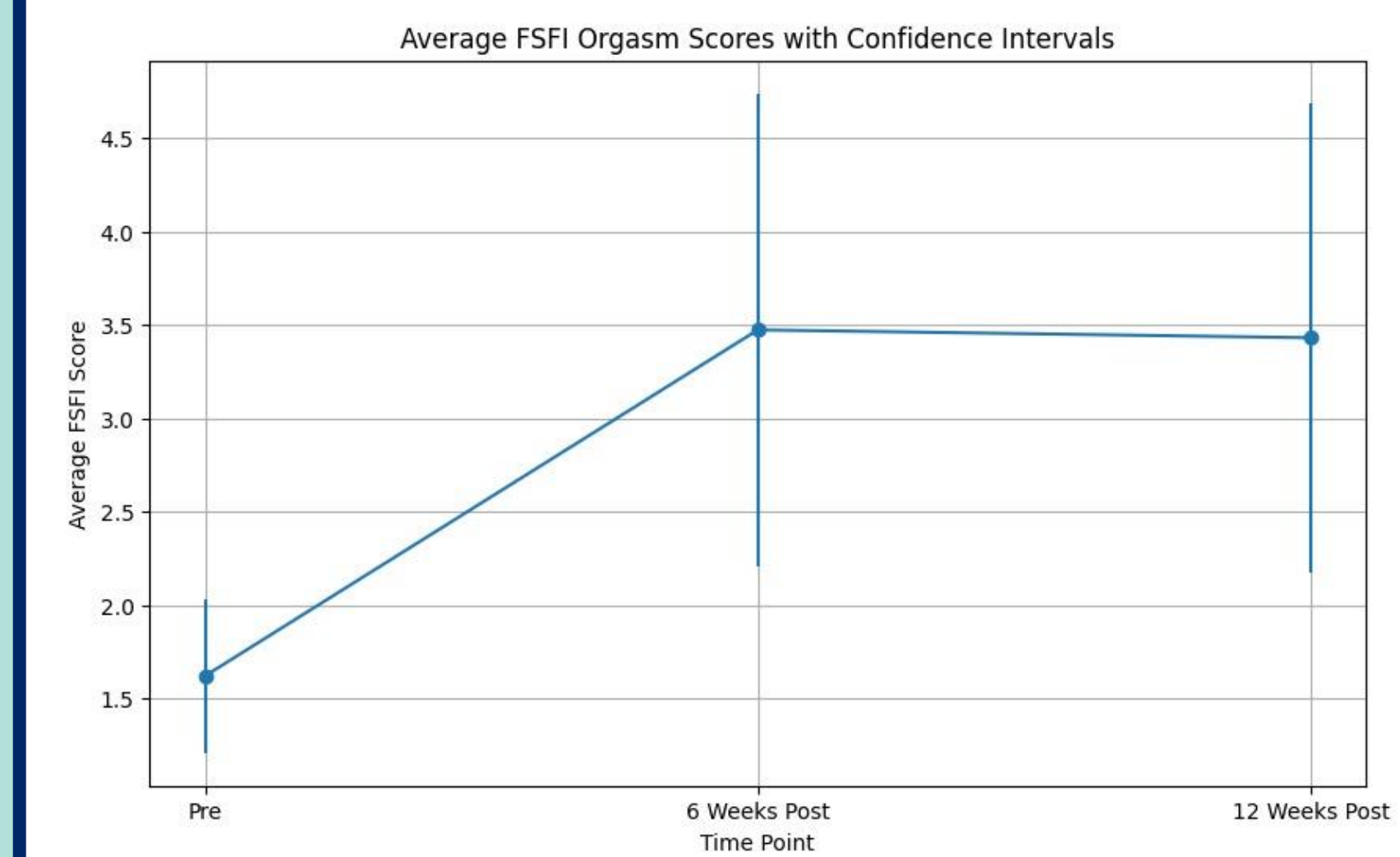
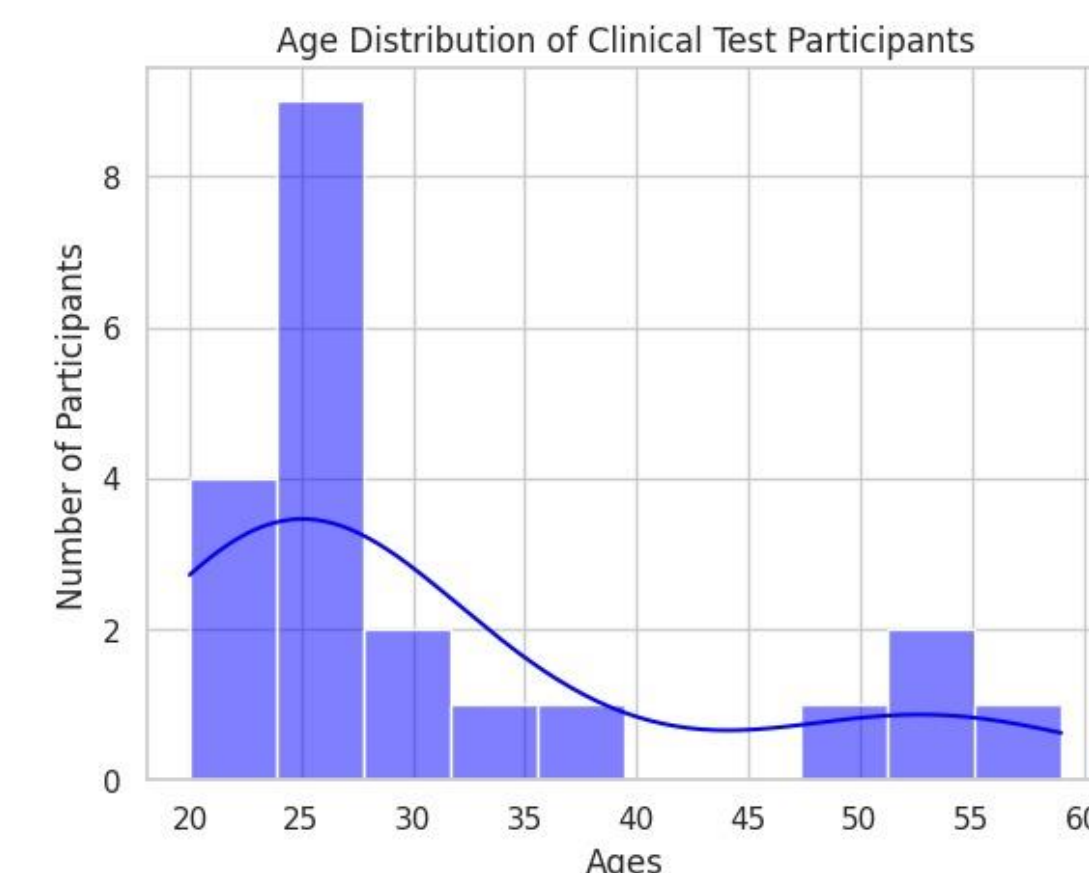


Figure 3.
This plot depicts the rise in average FSFI orgasmic domain scores from pre-test to post-test, indicating enhanced sexual function post-treatment.

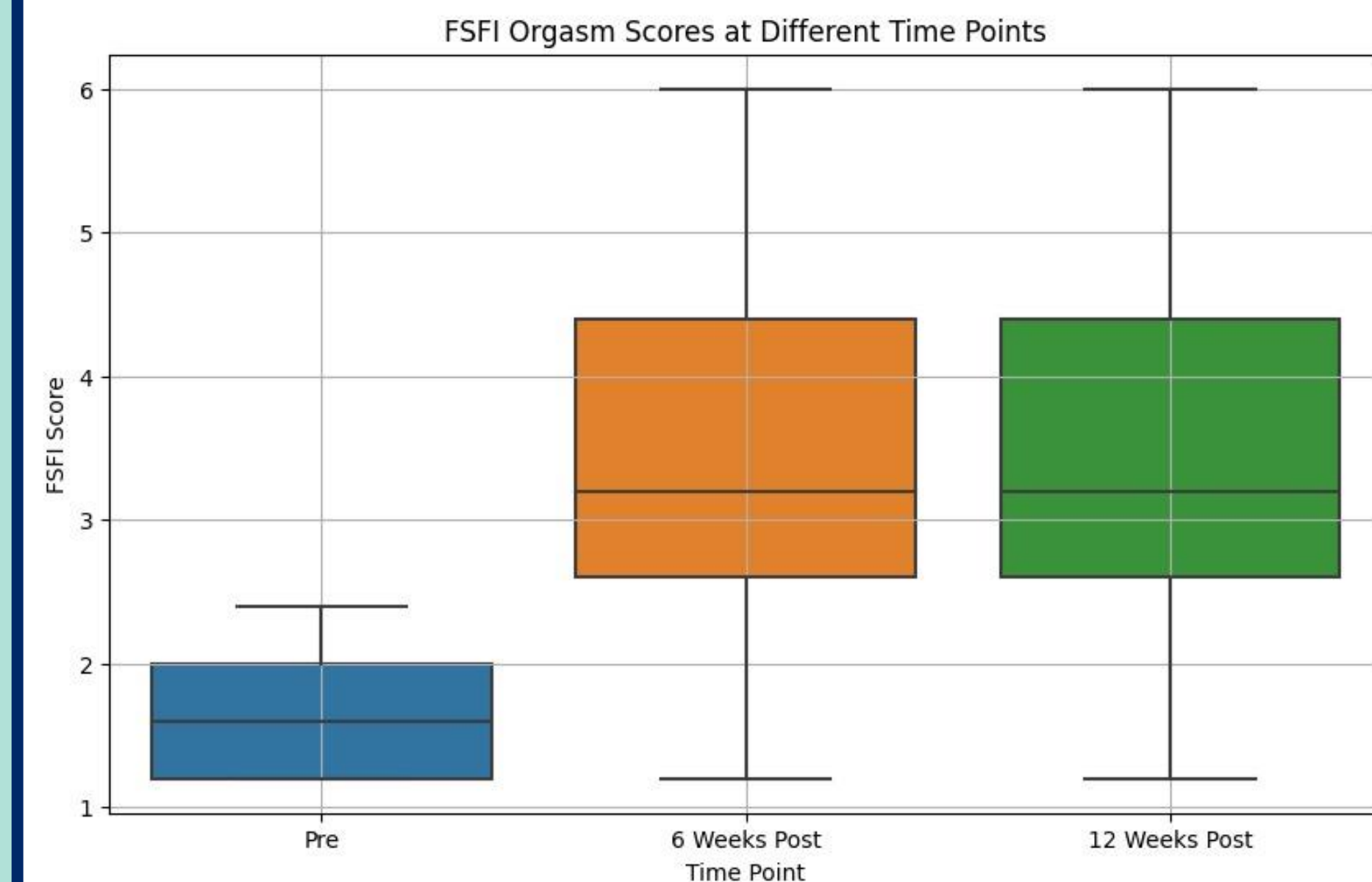


Figure 4.
In this chart, the direct scores of the orgasm domain are shown in the pre-test, results after six weeks, and results after twelve weeks.

Conclusion

This case series suggests that the use of a vibration device could be an effective and safe therapeutic option for female situational anorgasmia in addition to reducing the length and cost of treatment. Future

research with experimental designs should confirm the potential of the use of these devices in treating FOD, clarify issues related to the most appropriate amplitude and frequency of vibration, as well as the possible long-term effects of using these types of vibration devices with patients.

The use of virtual reality systematic desensitization for the treatment of psychogenic erectile dysfunction: A pilot study



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Introduction

Erectile dysfunction (ED) is a sexual dysfunction that affects the sexual health of millions of men around the world. In recent years, the evidence indicates an increase in cases of ED among individuals under 40 years old. In most cases, the etiology is of psychogenic origin. Cognitive-behavioral therapy (CBT) has been proven effective and remains one of the most widely used treatments for ED in these cases although controlled studies are lacking. One of the

most effective CBT techniques is a set of activities performed by a couple, known as systematic desensitization (SD). SD involves gradually exposing the patient to feared intimacy-related activities with their partner. However, many patients do not have a stable partner or do not want their partner to participate in the treatment. Technological advances are helping to create virtual SD programs which are able to reproduce the sights, sounds, and other sensations of the feared situation.

Aim

To determine the potential usefulness of a new virtual reality-based SD program for the treatment of psychogenic ED (pED).

Method

Six sexually active men diagnosed with pED based on criteria for Erectile Disorder from the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) completed virtual SD over 8 weeks. The program consisted of one educational session and five different virtual reality audio exercises which were completed at home using a masturbation aid device called Myhixel ED01, that is connected to a smartphone. The five-item Spanish version of the International Index of Erectile Function (IIEF-5) questionnaire was used to assess symptoms before and after the treatment and the Erectile Dysfunction Inventory of Treatment Satisfaction (EDITS) questionnaire was used for evaluating satisfaction with treatment.

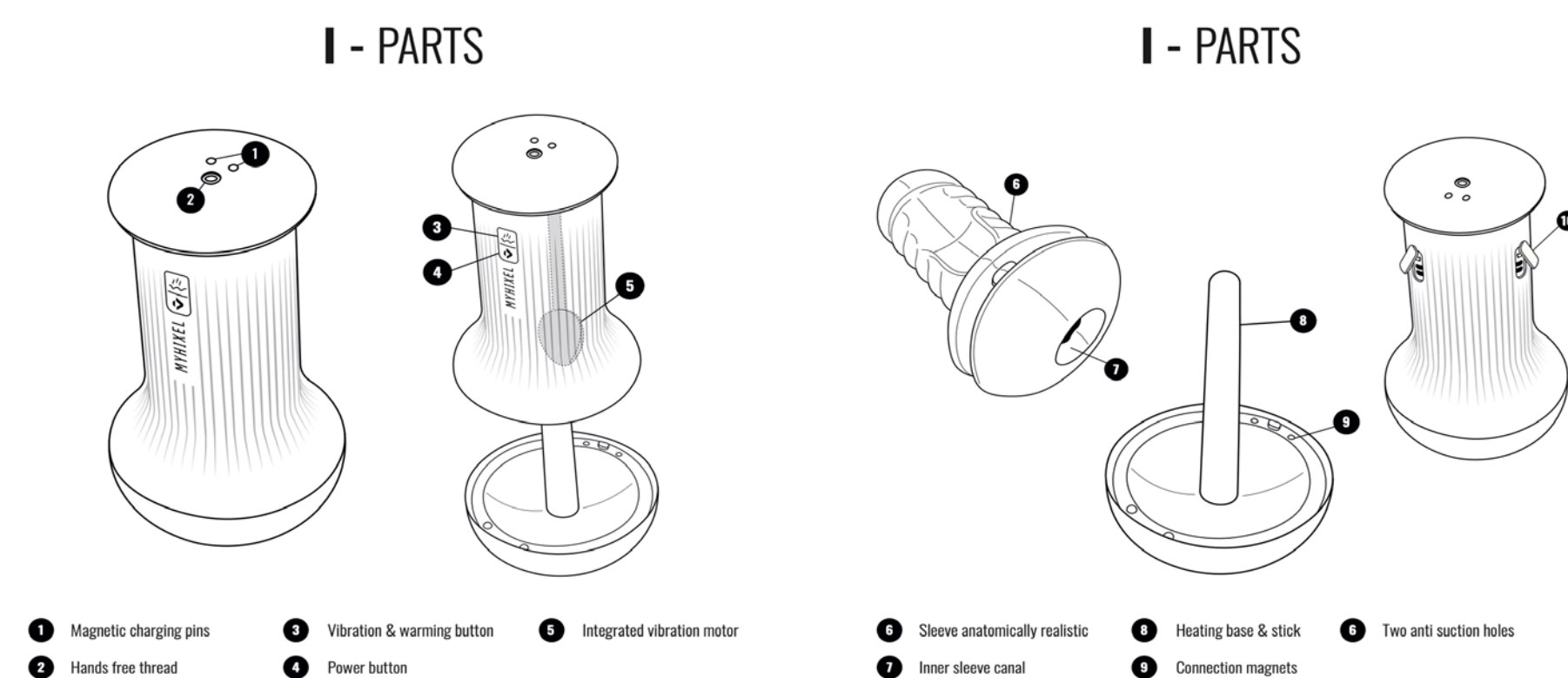


Image 1. Parts of the Myhixel II



Image 2. Myhixel ED01.
Sessions guided by an immersive audio experience.



Image 3. QR.
The link to the immersive audio experience used in the study

Results

Patients enrolled had a mean age of 34.83 years (range 27-39) and experienced an improvement in erectile function, mean IIEF-5 score pretreatment was 11(range 9–13) mean posttreatment IIEF score was 18 (range 14-21). The mean EDITS index score at the end of the treatment was 64.70 (range 59-70.25). No adverse effects were reported during the treatment.

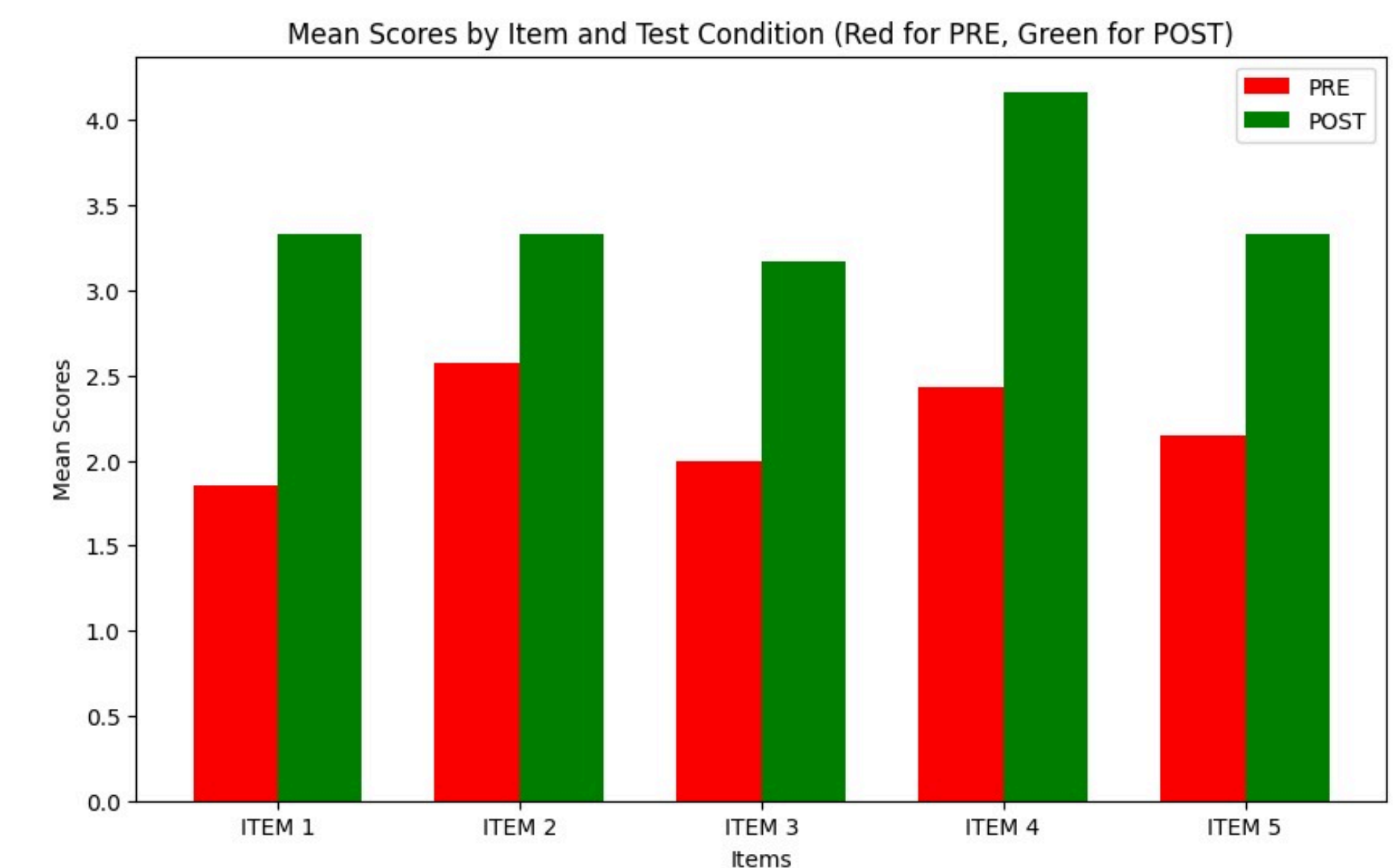


Figure 1. IIEF-5 scores. Results of treatment-related questions pre-treatment and post-treatment.

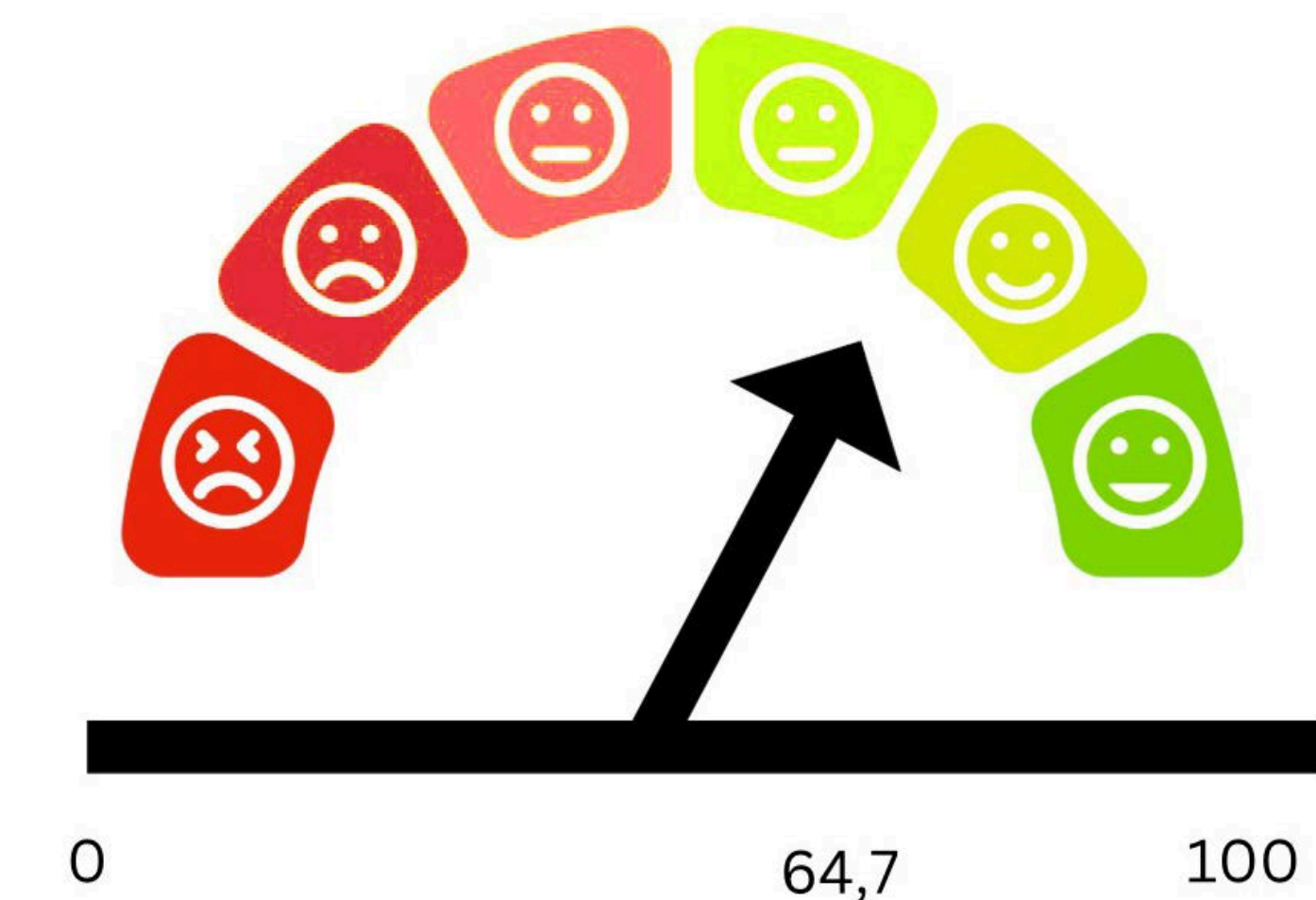


Figure 2. EDITS average score. Results illustrates the average satisfaction level of patients after the treatment.

Conclusion

This case series suggests that the use of a virtual reality-based SD could be a potentially effective and safe therapeutic option for men with pED. This new treatment would facilitate greater access of men with pED to one of the most commonly used strategies of sexual therapy, as it would no longer require the participation of a partner. Studies with adequate sample sizes, control groups, randomization, and follow-up are needed to determine the effectiveness of this new treatment.