Sexual Dysfunction Linked to Poor Treatment Adherence

April 21, 2008

HIV-positive people with sexual dysfunction are less likely to adhere to their antiretroviral (ARV) treatment regimens, according to a study published in the May 2008 issue of *AIDS Patient Care and STDs*.

There have been few studies examining the prevalence of sexual dysfunction—which can include problems with libido, erections or orgasms—among people living with HIV. Though certain risk factors for sexual dysfunction, such as depression and smoking, are common among people with HIV, studies have yet to determine whether HIV itself, or the medications used to treat it may be associated with a greater risk of sexual dysfunction.

To explore these potential associations, Maria Paola Trotta, MD, from the Istituto Nazionale per le Malattie Infettive in Rome, and her colleagues surveyed 612 people living with HIV on ARV treatment about their emotional, physical and sexual well-being. The majority, 72 percent, were men. The average age of the participants was 37 years, and their average CD4 count was 543.

Trotta's team found that 21 percent of the participants reported some degree of sexual dysfunction, and 6 percent had moderate to severe dysfunction. Though the participants were not formally assessed for clinical depression or anxiety, those who reported having worse emotional well-being were not more likely to report having sexual dysfunction. Neither drug nor heavy alcohol use was associated with sexual dysfunction, nor was CD4 count, age, the specific ARVs being used or the duration of ARV therapy.

Participants who reported more ARV side effects, however, and those who reported fat accumulation in their guts were more likely to report sexual dysfunction. People who reported having sexual dysfunction, especially those in whom the dysfunction was moderate or severe, were also more likely to report skipping or missing ARV doses. Trotta's team found that people with sexual dysfunction were likely to blame the antiretroviral drugs for the problem, and so they hypothesized that this could have reduced a person's motivation to remain adherent.

The authors did not report whether the use of antidepressant medications, which can lower libido and delay ejaculation, had an impact on sexual functioning in this study.

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