

Sexual Problems Following Traumatic Brain Injury
Information Booklet for Patients and their Partner



Talis Consulting Limited

What Kinds of Sexual Problems can occur Following a Head Injury?



A head injury can cause complex changes. There are a wide range of sexual problems which may occur following a head injury, however some of the more common ones are listed here:

Lack of Interest in Sex

A lack of interest in sex, or a lack of arousal is the most often reported sexual problem following a head injury. It is important for the partner to not take this personally, and not to look at it in terms of “fault”. A lack of interest in sex may also be one facet of a general lack of motivation or drive for all things following a head injury, which is relatively common. Also a reduction of interest in sex can be due to problems of fatigue which are also common consequences of a head injury.

Disinhibition

Disinhibition describes the tendency of the brain injured person not to be able to control their impulses and behaviours. They may make inappropriate comments in public, or behave in an openly sexual manner. Disinhibition is not a sexual dysfunction, rather it is normal sexual behaviour displayed in an impulsive or exaggerated way, or in an inappropriate context.

Increased interest in Sex

Increased interest in sex can also occur. There may be an inability to reach sexual satisfaction which can occur with damage to particular structures of the limbic system (a structure inside the brain which deals with a range of behaviours, including arousal and emotions).

Genital Problems

In addition to the behavioural problems described above, there can also be direct genital problems. For example problems getting or maintaining an erection, or problems with there not being enough vaginal lubrication. There may also be a loss of sensation in the genitals following damage to areas of the brain responsible for your sense of touch.

However these problems can also occur for other reasons than as a result of traumatic brain injury. For example medication can adversely affect erections, or psychological problems like anxiety and stress can be the cause.

Why can a Head Injury cause Sexual Problems?

Sexual problems following a head injury tend to be relatively common, affecting around half of head-injured people. This is largely down to the fact that there are so many different ways in which sex can be affected following a head injury. These problems can be broadly grouped into direct problems and indirect problems:

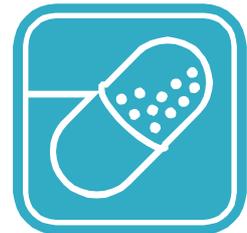
Direct Problems:

Organic Damage: There are areas of the brain which regulate arousal and sexual functioning. The main area being the hypothalamus. However the hypothalamus is situated in the centre of the brain.

Hormonal Changes: In some situations, the hormonal balance in the brain may be shifted following a head injury. This can cause sexual problems through altering the way your brain responds to arousal.

Indirect Problems:

Medication: Sexual problems can be related to medication you may have been prescribed to help in your recovery from head injury. For example, it is estimated that a quarter of cases of erectile dysfunction are due to medication. However if you believe your medication is causing you problems, it is important that you do not stop taking it. Consult your GP and they will be able to help you.



The affects of other Symptoms: Head injury is a complex problem, and can be accompanied by a wide range of symptoms, some of these can cause sexual problems indirectly. For example headaches, dizziness, nausea and fatigue are just some symptoms which can commonly follow a head-injury, and any one of which can take the enjoyment out of sex.



Psychological Problems: A significant proportion of sexual problems can be caused by psychological issues relating to your head injury. These can be problems with a lack of confidence following injury, not feeling attractive any more or depression and anxiety.

The majority of cases of sexual dysfunction following a head injury tend to be due to indirect factors. However indirect factors are comparatively easier to overcome, although you may need help from a clinician to enable you to achieve this. Direct problems cannot be overcome, require a different approach.

What can be done to help overcome disinhibition? (Advice for the partner)

Disinhibition can be a very difficult thing to deal with. It can be embarrassing for those who are with the injured-person, it can take the enjoyment out of going out and partaking in activities, and very often the brain injured person is unaware of why what they are doing is inappropriate due to reduced insight or self-awareness.

Disinhibition may improve by itself as other cognitive skills are re-learned; for example social skills, or adjustment and awareness of deficits. However there are a few things you can do to help improve disinhibition.

Ignore the behaviour

Disinhibited behaviour is not typically sexually motivated. Rather it is a way of gaining attention or of not knowing the social cues in terms of rules of behaviour. If you ignore the behaviour then this can help teach the injured-person that this kind of behaviour isn't the best way to gain attention.

Explain why

If the brain injured-person behaves in a disinhibited manner, then explain why the behaviour is inappropriate. Even saying things like "it upsets me" or "other people may be offended by what you just said" can help. Disinhibited people may respect these kinds of reasons.

Have the injured-person role-play with the correct behaviour

Describe what would be appropriate behaviour in situation where the injured-person has behaved in a disinhibited manner. Get them to repeat back to you the appropriate behaviour, and role-play the scenario in a socially acceptable way.



Use praise when the injured-person gets it right

It is important that you let the injured-person know when they have got it right. This is true both during real-life situations, and role-played scenarios. This will also help to teach the person that they receive good attention when they behave appropriately.

Don't take it personally

It is often be easy to take disinhibited behaviour personally and it can be very frustrating and embarrassing when a person behaves in a disinhibited way. It is important to always bear in mind that the person often cannot help the behaviour, and that they do not understand that the behaviour is inappropriate or hurtful. With guidance, feedback and rehabilitation, improvements can be made by tackling disinhibited behaviour.

What can be Done to Help?

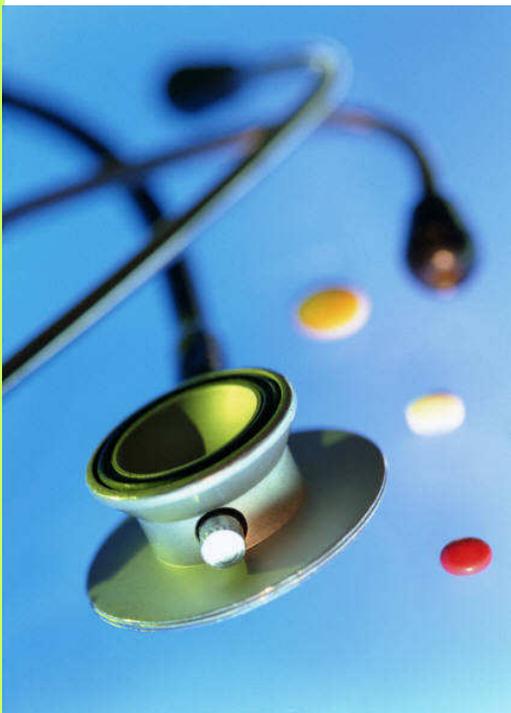
Earlier in the booklet sexual problems were divided into two types: Direct and indirect problems. This can make a useful distinction when considering treatment options.

Treatment options for direct problems:

Examples of direct sexual problems can include:

- Brain-injury to areas of the brain responsible for sexual arousal
- Difficulty getting or maintaining erections at all times (not just during sex)
- Difficulty in maintaining sufficient vaginal lubrication
- Loss of sensation in the genitals

Usually treatment for direct sexual problems involves some form of medication. This can sometimes be designed to resolve hormonal imbalances which can sometimes occur following a head-injury. Medication may also help if you lowered arousal, or a difficulty getting or maintaining erections. If vaginal lubrication is a problem then there are synthetic lubricants which can help.



Medication may also be prescribed to combat increased drive in sexuality if it becomes inappropriate or unwelcome.

A further point to bear in mind is that the brain has many mechanisms to help heal and repair itself. These mechanisms are important in overcoming many problems which may arise following a head injury, and sexual problems are no different. This means that if there is direct damage to areas of the brain, with time and appropriate rehabilitation these can slowly be improved by the brain's self-repair mechanisms, which may lead to a reduction in some of the direct symptoms.

What can be Done to Help with Indirect Problems

Sexual difficulties caused by indirect problems are far more common following a head-injury than direct problems. However they are also comparatively easier to overcome, although this may require professional help to do.

Examples of indirect sexual problems can include:

- A general lack of motivation
- Problems with self-care, such as personal hygiene
- Disinhibition
- Changes in the relationship, such as role changes
- The effects of other symptoms of head injury (e.g. headaches, fatigue etc.).

Decreased sexual interest

Decreased sexual interest is the most commonly reported problem following a head injury. However it is important to remember that this may be because of a lack of confidence from the injured person. Therefore it is important that you talk openly about such problems and share such issues.

Increased sexual interest

Sometimes sexual interest can increase following a head injury. If this is the case then the injured-person should be told as often as necessary and as clearly as possible that the behaviour is not acceptable. The partner has the right to say "NO".

Seek support groups

Support groups can provide a forum for social support with general issues and difficulties following a traumatic brain injury.



What can be Done to Help with Indirect Problems (Continued)



Keep lines of communication open

There will be inevitable changes in a relationship following a head-injury, and it can be very difficult to overcome problems if the partner does not know what they are. Therefore communicate openly and clearly to help overcome any problems you may encounter.

Work on improving the other symptoms of the head-injury which are problematic

Often sexual problems are related to more general difficulties a person may have following their head-injury. Therefore many sexual problems may improve as the person undergoes treatment for disorders of memory, attention, fatigue and motivation. With proper neurorehabilitation some improvements can be made in these areas.

Make sure you seek help if you need it

It can be embarrassing to seek help for sexual problems, however sexual problems can be an obstacle to rehabilitation. Sexual problems can also be an obstacle in taking the most enjoyment you can out of life. Therefore always seek help if you feel you need it.



Useful Websites:

www.headway.org.uk

- A useful web site with much information about brain injury and rehabilitation in the UK.

www.birt.co.uk

- Another useful web site concerning brain injury, with downloadable leaflets about brain injury and its implications.

**[http://www.bianys.org/_literature_45712/
Coping_with_sexual_problems_after_TBI](http://www.bianys.org/_literature_45712/Coping_with_sexual_problems_after_TBI)**

- A fact sheet concerning information specifically about sexual problems following a head injury, aimed at the injured person.

**[http://www.caregiver.org/caregiver/jsp/content_node.jsp?
nodeid=396](http://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=396)**

- A fact sheet concerning information specifically about relationship problems following a head injury, aimed at the injured person's partner

