

# Internet Sex Addiction and Its Negative Consequences: A Report

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Sir,

A 17-year-old male was referred from Surgery to Psychiatry OPD for evaluation of his unusual sexual behaviour. The patient was a drop out from 8<sup>th</sup> standard and currently working at a shopping mall. He underwent enterotomy at sigmoid colon for the foreign body when it could not be manually pushed down and retracted. On surgery, a 20cm by 4cm perfume bottle was recovered from the sigmoid colon. All the laboratory parameters were normal except leukocytosis. On detailed evaluation, the patient revealed that he was in habit of excessively watching porn videos on internet since last two years. He admitted to spending a lot of his time and wasting money in downloading such videos. After watching those videos, he tried to simulate the acts for his sexual gratification. The patient had two previous unprotected sexual contacts with his male friends through anal route and two sexual contacts with the female commercial sex workers through natural route. On asking about sexual orientation, he reported to have heterosexual orientation. He did not have any sexual dysfunction but reveals irresistible indulgence into the sexual behaviour. There was no history of sexual and physical abuse during childhood or chronic medical or psychiatric illness or substance abuse. On asking about the surgical complication, he revealed that he was secretly trying to get sexual satisfaction by inserting a perfume bottle through anal route, which accidentally travelled up into his sigmoid colon and he could not retract it back. As a result he felt great pain and discomfort in the perianal area and ultimately landed up in surgical emergency where he had to be surgically operated for the same. He admitted to developing the habit of internet addiction gradually after failing in class 8<sup>th</sup>. He resorted to various sexual acts in order to overcome the stress related to his academic failure and constant criticism by his parents. Although he had strong feelings of guilt but there were no other frank depressive features. He was diagnosed as suffering from Internet sex addiction. This patient was given several sessions of counselling for three months after which he improved. He was counselled to interact with the real people than resorting to internet habit. He was advised to join the sports club where he played tennis and got a chance to interact with more friends. Cognitive Behaviour Therapy done on the patient helped him to identify the triggers related to the sexual behaviour and made him understand his cognitive distortions. It helped him to stop his compulsive habit and change his perception regarding the internet use. He was also advised on the issue of using safe-sex practices. He resorted back to his old hobby of listening to music and playing cards. The parents were counselled for positively reinforcing their

son. They were taught to set time limits for using internet and monitor their son's activity on regular basis maintaining friendly relations with him at the same time. As a result he felt much better and became more productive at work.

One of the hallmark features of compulsive sexual behaviour is continuous engagement in sexual activities despite the negative consequences [1]. The repetitive sexual behaviour serve as means to escape the stress and tension ultimately becoming a way to cope up and handle problems [2]. Research on Internet addiction disorder indicates rates may range from 1.5 to 8.2% in Europeans and Americans [3,4] whereas other studies [5-7] have estimated the prevalence as 9% to 13.5% among Canadian youths. Males appear to be more addicted to this behaviour than females. The habit of simulating excessive sex practices may lead to the bad consequences such as marital disputes, loss of partner or spouse, loss of sleep, loss of work and subsequently financial losses. The patients are also at risk of physical consequences such as surgical complications and acquiring the sexually transmitted diseases [8]. The role of Selective Serotonin Reuptake Inhibitors, mood stabilizers and antipsychotics has been inconclusive although Psychotherapy and behavioural techniques have shown successful results even without pharmacotherapy. One of the researchers has found out relationship of mesolimbic system related to reward given by sex and used Naltrexone to suppress excessive sexual activity [9].

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