



Sexual disorders in patients with vitiligo

Troubles sexuels chez les patients ayant un vitiligo

Amira Maamri^{1,3}, Talel Badri^{2,3}

1- Service des consultations externes, Hôpital Razi, Faculté de Médecine de Tunis, Université de Tunis El Manar, Tunisie

2- Service de dermatologie, Hôpital Habib Thameur, Faculté de Médecine de Tunis, Université de Tunis El Manar, Tunisie

3- Société Tunisienne de Sexologie Clinique

Vitiligo is a dermatosis that alters the quality of life, self-esteem and body image (1-3). The different treatments are often disappointing. We evaluated, through a review of the literature on MEDLINE, sexual disorders (SD) in patients with vitiligo.

Few studies were available. These are difficult to compare with each other, due to the heterogeneity of the populations studied and the evaluation parameters.

The reported prevalence of SD in vitiligo varies from 11.5 to 62.5% (1,2,4-6). Higher prevalence among women has been reported by some authors (4) but not by others (1,2), which may be due to differences in assessment parameters and cultural differences between populations studied. Those most likely to have "sexual difficulties", among persons with vitiligo, would be those with low self-esteem (1).

Relational problems with the opposite sex are mainly related to feelings of shame and embarrassment, especially when initiating a relationship with a new partner. Patients with vitiligo may anticipate failure and therefore adopt an attitude of avoidance of sexual intercourse (3).

Chinese patients with vitiligo, assessed by the ENRICH marital inventory (describing the dynamics of the couple), had couples relationships that were poorer and less stable than the control group. Patient scores were low on satisfaction, communication, and sexual relations. This alteration of the ENRICH inventory was more pronounced in young women and in cases of severe disease and affecting the visible regions (5).

Silverberg and Silverberg (2) estimate that a depigmented skin area greater than 25%, and genital area involvement were predictive of the occurrence of SD. The association of extensive skin involvement and genital depigmentation with SD was also noted in a Korean study (6) in which these

two parameters were found to be risk factors in multivariate analysis.

Sukan and Maner (4) studied in Turkey the sexual function of 50 patients with vitiligo, compared to 50 others with chronic urticaria and 50 controls. The scale used was the Arizona Sexual Experience Scale (5 items, studying sexual desire, excitement, vaginal lubrication / erection, ability to reach orgasm, and satisfaction from orgasm). Women with vitiligo had more disorders in each of the 5 items than the controls. As for men, the only statistically significant difference with the controls was a lower satisfaction obtained from orgasm in vitiligo patients. A correlation between SD and the extent and location of vitiligo was not investigated.

An Egyptian study (3) of 50 women with vitiligo versus 25 controls also noted that the severity of vitiligo was negatively correlated with sexual satisfaction. Female Sexual Function Index (FSFI; 19 items) was significantly more impaired in patients than in controls. The overall score and sub-scores, assessing desire, excitement, lubrication, orgasm, pain, and satisfaction, were lower in women with genital area involvement than in patients without genital involvement and controls. The Female Genital Self Image Scale score (assessing women's image of their own genital organs) was also lower in women with genital vitiligo. The alteration of these two scores was also statistically related to impaired quality of life.

In addition to the Egyptian study, which used the FSFI, which is a reference scale in sexology (7), the other studies have focused on sexual function only in a global way or using scales with little items. In addition, the study of male sexual function during vitiligo, using the 15-item reference scale: the International Index of Erectile Function (7) has not, to our knowledge, been the subject of publications.

Correspondance

Amira Maamri

Hôpital Razi/ Service des consultations externes / Université de Tunis El Manar/ Faculté de médecine de Tunis

e-mail : dr.amiramaamri@gmail.com

Despite the few publications, vitiligo seems to alter the sexuality of the patients, especially when it is diffuse and/or located to the genital area. Comparative studies, including a greater number of patients and using sexology reference scales, could better account for SD during vitiligo.

Conflict of interest: none

REFERENCES

1. Porter JR, Beuf AH, Lerner AB, Nordlund JJ. The effect of vitiligo on sexual relationships. *J Am Acad Dermatol*. 1990;22:221-2.
2. Silverberg JI, Silverberg NB. Association between vitiligo extent and distribution and quality-of-life impairment. *JAMA Dermatol*. 2013;149:159-64.
3. Sarhan D, Mohammed GF, Gomaa AH, Eyada MM. Female genital dialogues: female genital self-image, sexual dysfunction, and quality of life in patients with vitiligo with and without genital affection. *J Sex Marital Ther*. 2016;42:267-76.
4. Sukan M, Maner F. The problems in sexual functions of vitiligo and chronic urticaria patients. *J Sex Marital Ther*. 2007;33:55-64.
5. Wang KY, Wang KH, Zhang ZP. Health-related quality of life and marital quality of vitiligo patients in China. *J Eur Acad Dermatol Venereol*. 2011;25:429-35.
6. Kim DY, Lee J, Oh SH, Hann SK, Shin YJ. Impact of genital involvement on the sexual lives of vitiligo patients. *J Dermatol*. 2013;40:1065-7.
7. Giuliano F. Les questionnaires recommandés en médecine sexuelle. *Prog Urol*. 2013;23:811-21.