

Psychological Impact and Sexual Behavior in Patients with Genital and Anal Condylomatosis

M Trigui¹, H Smaoui, A. Chaabouni², A Samet¹, L Chtourou², M Fourati, I Mejdoub², W Smaoui¹, O Kammoun¹, MA Mseddi¹, J Mziou³, N Rebai¹, H Turki³, N Tahri², and M Hadj slimen¹

Service d'Urologie, CHU Habib Bourguiba Sfax Tunisie

Service de gastrologie, CHU Hedi Chaker Sfax Tunisie

Service de Dermatologie, CHU Hedi Chaker Sfax Tunisie,

Correspondence should be addressed to Fadi Al Akhrass, Infectious Disease and Infection Prevention at Pikeville Medical center, Kentucky, USA

Received: January 16, 2022; Accepted: January 23, 2023; Published: January 31, 2023

INTRODUCTION

Genital warts are benign viral tumors of the skin or mucous membranes, due to human papillomaviruses. Rare are the authors who insist on studying the psycho-affective and sexual impact of this condition.

MATERIALS AND METHODS

Through a prospective study of 26 patients, over a period of three months, having venereal condyloma, we have tried to illustrate the emotional, psychological and sexual disorders reactions in both men and women.

RESULTS

Our 26 patients are divided into 14 men and 12 women. The majority of our patients were young with an average age of 35-years. Three men were single, three divorced women, 4 couples with impairment of both partners and 12 patients (7 men and 5 women) in whom the partner could not be examined. Our patients belonged to various socio-professional categories. Fifteen patients had a history of genital and anal infections. Seven men presented with

acute urethritis presumed to have gonococci. Eight women had recurrent genital infections at candida, 4 of which were associated with trichomonas and one with gonococcus and chlamydia and 2 women had anal condyloma.

All of the women denied having had premarital sex, while 13 of the 14 men had multiple partners, two of whom had sexual intercourse. homosexual and heterosexual relationships. The complaint was most often non-sexual, only 5 of our patients presented a reason for sexual consultation. Affective reactions were present in two-thirds of our patients and mental disorders in three-quarters of them at the announcement of the sexual transmissibility of the disease. The anxiety was found in half of the cases. 11 patients had the most sexual disorders often associated or generated by psycho-affective disorders.

DISCUSSION

Human papilloma virus (HPV) is the most common sexually transmitted disease throughout the world. The vast majority of sexually active adults are affected at some point in their lives. Most will have no symptoms or self-limited anogenital lesions. There are 150 genotypes. Forty can

Citation: M Trigui, Psychological Impact and Sexual Behavior in Patients with Genital and Anal Condylomatosis. Int J Can Med 6(3): 131-133.

infect the anogenital organs. 2 HPV subtypes are categorized as low or high risk according to their propensity to progress to squamous intraepithelial lesions [1].

Women have a gender-specific vulnerability to the health and sexual consequences of HPV infections. They have almost twice the percentage of genital warts in comparison with men [2]. Women have a higher vulnerability to oncogenic HPV, mostly at cervical and vulvar site. The health and sexual risks linked to HPV infections are currently underestimated by women themselves. Research on the specific impact of Genital Warts and intraepithelial neoplasias on sexual function and relationship in women is limited. Research focuses more on general psychological outcomes, such as depression, anxiety, guilt, anger, rage, or sexuality as a general issue rather than focusing on specific dimensions of women's sexuality [3]. The only disorder investigated to explore if it could be related to HPV infection is dyspareunia via the link with vulvodynia/vulvar vestibulitis. However, the relationship between HPV and vulvar vestibulitis-related dyspareunia appears to be eventually a sequelae of the HPV-related diseases treatment rather than the HPV infection itself. Conaglen et al. [4] in their individual case control study on 101 consecutive clients attending an STD clinic, evaluated with four validated questionnaires, found that those diagnosed with a first episode of HPV had considerable psychological difficulties (25% of the HPV-positive group complained suffering social dysfunction vs. 7.9% of the HPV-negative group; 17.9% reported severe depression vs.

10.5%); 29% of men and 10% of women with a first episode of GWs could be classified as having sexual concerns at their first visit. However, the diagnosis of HPV was not associated with a greater psychological or psychosexual impact than that reported for other sexually transmitted infections [3]. To evaluate the psychosocial impact of taking part in repeated testing for HPV, Waller used in-depth interviews that were carried out with 30 women who were HPV positive with normal cytology at trial baseline, and attended for a repeat HPV test 12 months later [8]. This excellent qualitative study indicates that feelings of shock, confusion, and distress about testing HPV positive were common. These feelings are frequently related to the sexually transmitted nature of HPV and concerns. They were articulated about: (i) where the virus had come from; and (ii) anxiety about the health implications of HPV. Anxiety was triggered by lack of knowledge about HPV and followed by seeking further information about HPV from the Internet. Once some of the confusion had been resolved, women seemed able to put the result to the back of their mind until the next test. Particularly reassuring was the knowledge that the virus could lie dormant for a long time, so exposure was not necessarily recent and its presence did not mean that a partner had been unfaithful [5].

CONCLUSION

Genital and anal warts are a source of embarrassment, shame and mistrust. Prevention is crucial and requires a sex education program.

REFERENCES

1. Svidler López L, La Rosa L (2019) Human papilloma virus infection and anal squamous intraepithelial lesions. *Clinics in Colon and Rectal Surgery* 32(5): 347-357.
2. Dinh TH, Sternberg M, Dunne EF, et al. (2008) Genital warts among 18- to 59-year-olds in the United States, national health and nutrition examination survey, 1999–2004. *Sexually Transmitted Diseases* 35: 357-360.
3. Conaglen HM, Hughes R, Conaglen JV, et al. (2001) A prospective study of the psychological impact on patients of first diagnosis of human papillomavirus. *International Journal of STD & AIDS* 12: 651-658.

4. Graziottin A, Serafini A (2009) HPV infection in women: psychosexual impact of genital warts and intraepithelial lesions. *The Journal of Sexual Medicine* 6(3): 633-645.
5. Waller J, McCaffery K, Kitchner H, et al. (2007) Women's experiences of repeated HPV testing in the context of cervical cancer screening: A qualitative study. *Psychooncology* 16: 196-204.