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Theme : Rehabilitation, Quality of Life and Survival

## **Sexual Dysfunction in Peritoneal Dialysis Patients: :A Multicenter Collaborative Study**

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**Objectives** The aim of this study was to evaluate sexual dysfunctions in patients on chronic peritoneal dialysis (PD).

**Methods** A cross-sectional study was conduct in 8 PD centers in northern Taiwan. Sexual dysfunction was investigated using the Index of Female Sexual Function (IFSF) for female and the International Index of Erectile Function (IIEF) for male. Demographic data, medical parameters, the Pittsburgh Sleep Quality Index (PSQI), and the Beck Depression Inventory (BDI) were analyzed. The 36-item Short Form Health Survey Questionnaire (SF-36) was also used to survey their quality of life (QOL).

**Results** A total of 45 female patients and 51 male patients completing all questionnaires were enrolled. The mean age was 43.6+7.4 years in female and 49.0+11.0 years in male. In the female patients, the mean IFSF score was 25.8+7.2. Comparing with age-matched health volunteers, they had lower scores in the degree of lubrication, the ability to achieve orgasm, the degree of clitoral sensation, and total score of IFSF, but not the scores in the quality of sexual intercourse, desire, and overall satisfaction with sexual function. Age, BDI score, and PSQI scores were negatively correlated with IFSF total score. Patients with higher IFSF total scores had significantly higher scores in physical functioning, vitality, and social functioning. Among male patients, 27 patients (52.9%) had erectile dysfunction (ED), defined as scoring 25 or less in the erectile function domain of IIEF. Patients with ED were less likely at employment status. Age was negatively correlated with scores of erectile function, orgasmic function, intercourse satisfaction, overall satisfaction, and total IIFE score, but not sexual desire. We found no correlation of male sexual dysfunction on their QOL.

**Conclusion** Sexual dysfunction is frequent in the PD population. Gender difference existed in the attributing factors of sexual functioning and the impact on QOL.