

# Stonebriar Psychiatric Services News & Views

## Sexual Addiction

MARCH, 2007

VOLUME 3, NUMBER 3



**David T. Tharp,  
M.D., M.Div.,**

**Board Certified  
Psychiatrist**

**Medical Director**

**Stonebriar  
Psychiatric Services,  
PA**

3550 Parkwood Blvd.  
Suite 705  
Frisco, TX 75034

**Phone**  
972-335-2430

**E-mail**  
NewsletterQuestions@  
stonebriarps.com

**We're on the Web!**  
[www.stonebriarps.com](http://www.stonebriarps.com)

#### Services We Offer

Individual Therapy  
Marital / Couple's  
Family Therapy  
Personal Life Coaching  
Group Therapy  
Medication  
Management  
Speaking  
Seminars

#### Treatment for

Depression  
Anxiety / Panic Attacks  
Eating Disorders  
Bi-polar Disorder  
Obsessive –  
Compulsive  
Disorder  
Compulsive Behaviors  
such as sexual  
addiction  
Post-traumatic Stress  
Disorder from  
past abuse  
Relational issues  
Adjustment to life  
changes

#### Ages Served

Adult  
Adolescent  
Children ages 10 & up

### *Sexual Addiction...Fact or Fantasy*

*John never thought that he would be “one of those kinds of people.” After all, he held a high management position in a well-known company, had been happily married for 22 years, had three successful children, and was recently re-elected as one of the deacons in his church. But now he was being handcuffed and led off by a policeman after a raid on a local massage parlor. He had never thought that it would come to this. Scared and ashamed, he reflected back on the first time he had seen a naked woman in a magazine at age 12...his heart was racing then, but nothing like it was now.*

Sexual addiction, also known as compulsive sexual behavior (CSB), has finally come out of the closet; or at least peeked out enough so that people know that it is around. The term sexual addiction might be defined as inappropriate or excessive sexual behaviors or thoughts of an individual that cause subjective distress or an impairment in one's functioning, and which may lead to financial, legal, or interpersonal problems. Sex or thoughts about sex frequently dominate the thought life of a sex addict and tend to interfere with work or the ability to have healthy relationships with others. Although crimes against others can occur in certain cases, this only represents one extreme form of sexual addiction.

Behaviors that are often associated with sexual addiction include compulsive masturbation, at times to the point of injury, multiple affairs or multiple anonymous sexual partners or one night stands, the regular use of pornography, engaging in unsafe (unprotected) sex, or involvement with prostitution, massage parlors, strip clubs, etc. Perhaps one of the most growing and problematic areas includes phone sex or cybersex, including internet pornography. Many of these activities, while they may be considered immoral, are frequently legal in many places. Sexual addiction may cross over into illegal activities such as exhibitionism, voyeurism and/or stalking, or even molestation, rape, or sexual activity with minors. Paraphilias, which are characterized by intense sexual fantasies or urges involving unusual objects or activities not generally considered arousing to others, may also occur with sexual addictions. These may include activities such as exhibitionism, pedophilia, fetishism, sadism/masochism, cross-dressing, or voyeurism. Regardless of the behavior, one factor held in common with other compulsive or addictive behaviors is that the individual tends to feel out of control but will persist in the behavior in spite of real or potential negative consequences.

### *Is This Really a Problem?*

A number of studies have estimated the prevalence of compulsive sexual behavior at between 3-6% in the United States, although many believe that this is significantly underestimated and underreported. Some Christian authors and counselors have estimated that struggles with pornography may exist in as many as 50% of males who currently attend church, and one survey in *Christianity Today* said 37% of pastors admitted that they struggle with Internet pornography. Although it occurs more often in males than females, a number of studies have indicated that up to 20-25% of sexual addictions may involve females. Although not a constant in every case, males tend to pursue the physical gratification and release with orgasm, whereas for many females they may be looking for the emotional attachment but use sex as the means for at least temporarily obtaining it. For women, this may often lead to dangerous encounters or at times to multiple, unsuccessful love relationships. Many studies have indicated that the age of onset of symptoms tends to be around age 18 or earlier. For many men, their first encounter with pornography may be a trigger, although some studies have indicated that up to 80% of all sex addicts have also experienced some form of sexual abuse.

Studies have repeatedly shown that there tends to be a high incidence of other comorbid psychiatric disorders when CSB is present. Depressive disorders have perhaps the highest incidence, although various mood and anxiety disorders,

substance use disorders, personality disorders, as well as eating disorders, primarily related to bulimia, may be present and with greater frequency than in the general population.

### *But Is This Really an Addiction?*

In 1983, Dr. Patrick Carnes, one of the early pioneers in studying sexual addiction, defined an addiction as "a pathological relationship with a mood altering experience." Individuals who have grown up in difficult family situations have often learned not to trust others and frequently struggle with forming intimate relationships. As they get older, they search for something that will relieve this emotional discomfort and which they can trust to do it effectively and consistently. One may turn to sex, alcohol or drugs, work, or almost any other activity used in a compulsive manner to try and ease this discomfort.

Others have defined an addictive behavior as one that tends to be repeated, often escalates in frequency or intensity, feels out of control, and yet continues in spite of real or potential negative consequences. Many would also view any addiction as ultimately representing an intimacy disorder. The addiction works through continued pleasurable stimulation which can ease one's loneliness and temporarily reduce and numb the shame that the individual generally feels. Dr. Gerald May, in his book entitled *Addiction and Grace*, makes the point that almost any behavior or activity, even ones that may actually be positive, can become addictive in quality and pattern. For example, golf and gardening, in and of themselves, are neither positive or negative, depending on one's point of view. If these become an escape and are engaged in to the detriment of personal relationships or other areas of one's life, then Dr. May makes the point that they can be at least "addictive" in quality.

Addictive behaviors, including that of sexual addiction, operate in what has been termed an addiction cycle. Compulsive sexual behavior begins with preoccupation, as one is obsessing and thinking about sexual or romantic activities. We all have some of these thoughts and feelings, but the fantasy becomes an obsession when it serves in some way to avoid life and life's struggles. The obsessions are intensified through the use of ritual, which involve the activities that set the stage for and lead up to the sexual acting out. It frequently is described as almost a trancelike state as one becomes involved in the behavior and separate from reality. For some, this may represent "cruising" the areas in which they know strip bars exist, or perhaps just the ritual of turning on their computer and "firing it up." The next phase in the cycle is the carrying out of the sexually compulsive behavior, or "acting out" phase, and it is during this phase that the tension felt by the addict is relieved. However, that relief is short-lived, and soon feelings of guilt and despair set in. These only serve to again escalate feelings of tension and shame, and the cycle is once again resumed in order to relieve these feelings.

### *Treatment*

The treatment of sexual addiction focuses primarily on controlling the addictive behavior while helping the individual develop a healthy sense of sexuality and ability to form intimate relationships. Individual therapy, along with marital or family therapy, is generally needed, along with general education regarding healthy sexuality and relationships. Medication may be useful to treat the comorbid psychiatric conditions, such as depression or anxiety disorders (see previous newsletters), although there are no specific medications that are consistently successful in treating the compulsive sexual behavior. Although some medications may reduce one's sexual drive, this is not generally a reliable approach. A number of 12-step recovery programs exist, and many would consider these to be extremely important for one's recovery. These would include Sex Addicts Anonymous (SAA), Sexaholics Anonymous (SA), and Sex and Love Addicts Anonymous (SLAA). There are also a number of support groups, such as Celebrate Recovery, which operates specifically out of local churches.

There are many excellent books that have been written with regard to sexual addiction, and for that I would refer you to our web site under the sexual addiction heading found in the resource section. If you have questions regarding whether you may be struggling with compulsive sexual behavior, I would encourage you to take the screening test found at: <http://stonebriarps.com/SAST.pdf>. The more positive responses that you have checked, the more likely that this represents a potential problem that needs to be addressed. Admitting the problem is difficult, but help is available.



Do you have topical requests for future newsletters? Let us know at: NewsletterQuestions@stonebriarps.com



**Stonebriar Psychiatric Services, PA**  
3550 Parkwood Blvd. Suite 705 Frisco, TX 75034

**972-335-2430**

**[www.stonebriarps.com](http://www.stonebriarps.com)**