

Disinhibition or Hyper Sexuality after a Traumatic Brain Injury

Following a brain injury people can experience many sexual changes, including hyper sexuality, also called "compulsive sexual behavior," means being excessively intrigued with sexuality.

Symptoms can included:

- Spending too much time with sexual fantasies and urges; including, planning for and engaging in sexual behaviors.
- Repetitively engaging in sexual fantasies, urges, and behavior.
- Recurring but unsuccessful efforts to control or reduce sexual fantasies, urges, and behavior.
- Repetitively engaging in sexual behavior while disregarding the risk of physical or emotional harm to self or others.

Disinhibited or poorly controlled sexual behaviors usually occur because the person with the injury struggles to recognize and follow social rules, this means that sexual thoughts, impulses or needs are expressed in a direct or dis inhibited way. This may include suggestive verbalizations, undressing and/or masturbating in public, impulsiveness, inappropriate touching, and aggression. Disinhibition and hyper sexuality are not as common after a brain injury as decrease in libido but this can occur.

Some reasons this can occur following injury may include:

- Damage to parts of the brain such as the frontal cortex, hippocampus, temporal lobes, and/or amygdala. These areas of the brain are associated with self-control, foresight, attention and reasoning.
- Problems with making appropriate decisions regarding sexual behaviors due to decreased awareness and insight or impaired verbal or non-verbal communication skills.
- Lack of self-control or impulsiveness. Thoughts which are usually private may be said out loud.
- Increased substance or alcohol use (this increases the risk of being impulsive & alters the ability to make appropriate decisions).
- Important opportunities to maintain and form relationships is reduced or not available at all.

Ways to get help:

- While it may be awkward to talk about, it is important to seek professional help regarding hypersexual or disinhibited sexual behaviors. The healthcare team is prepared for talking about this important issue and it is nothing to be embarrassed about.
- Inform your primary care physician to connect you with the correct providers based on your needs.

Different providers can help with different needs:

- Medical doctors may provide medications to reduce sexual drive, and address side effects from medication.
- Clinical Mental Health Therapists can provide counseling for managing relationships impacted by sexual behaviors.
- Neuropsychologists can provide strategies for dealing with the cognitive challenges that impact sexual behaviors.
- Occupational therapists can provide suggestions surrounding impulse control, behavior management, and appropriate social interactions.

Remember, you are not alone. Up to 54% of individuals with moderate to severe brain injury report problems with sexual functioning.* Therefore, seeking help is important to better manage sexual difficulties and promote a good quality of life for yourself and your family.

*Ciurli P, Formisano R, Bivona U, Cantagallo A, Angelelli P. Neuropsychiatric disorders in persons with severe traumatic brain injury: prevalence, phenomenology, and relationship with demographic, clinical, and functional features. J Head Trauma Rehabil 2011;26(2):116–26.

At the Brain Injury Association of Virginia, our trained experts are available to speak with you about your experience, answer your questions, and connect you with the best resources based on your needs.

Our services are free and confidential.

To get in touch: Call 1-800-444-6443 Visit biav.net

This article is provided for informational and educational purposes only. The information is not intended as a substitute for professional advice, diagnosis or treatment, and you should not use the information in place of the advice of your medical, psychological, or legal providers.