

Gender differences in sexual health impairment in chronic urticaria: A systematic review

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Background

- Chronic urticaria (CU) is defined as the occurrence of wheals, angioedema, or both for more than 6 weeks. It can occur with daily or almost daily symptoms or an intermittent/recurrent course.
- CU causes substantial impairment in patients' quality of life.
- There is a paucity of studies on the impact of chronic urticaria (CU) on sexual health.

Objective

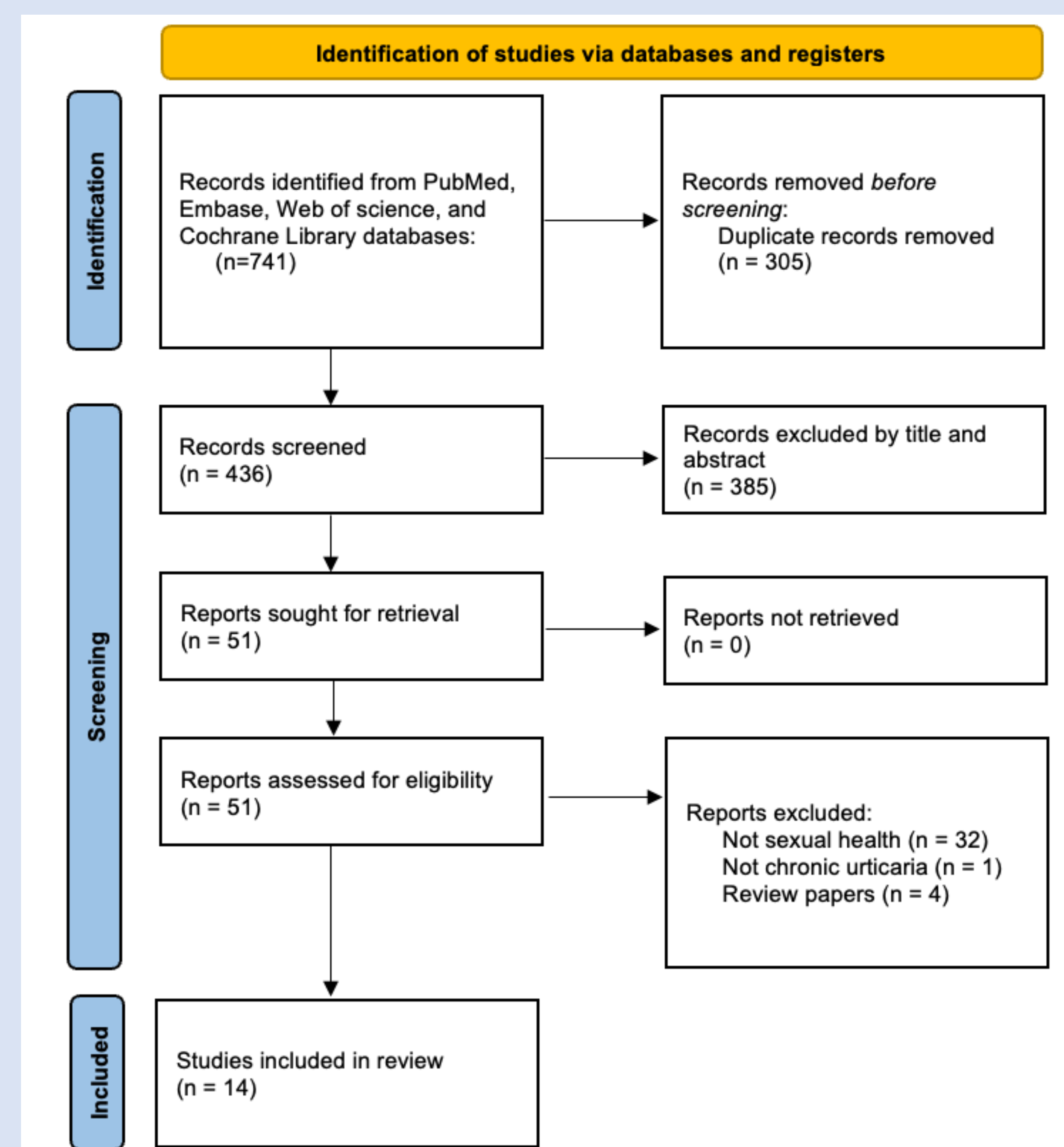
- Herein, we aim to systematically evaluate the existing literature on the sexual health of patients with chronic urticaria and examine their differential impact on women and men.

Methods

- A literature search using PubMed, Embase, Web of Science, and Cochrane library databases was conducted on September 19, 2023, using urticaria and sexual dysfunction (SxD)-related search terms.
- This study was performed following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines.
- Duplicates, reviews, editorials, non-human studies, and studies that did not study CU or sexual health were excluded.
- Two reviewers independently reviewed articles for inclusion and then extracted study design, patient demographics, disease characteristics, and results for each included article.

Results

Figure 1. PRISMA checklist



- Of the 741 articles that resulted from the database search, 14 met inclusion criteria, all of which reported sexual impairment in CU.
- Most studies had a cross-sectional design with or without a comparison group and included both male and female patients in their study population.
- The most frequently used tools for assessing sexual function were FSFI (n=7) and IIEF (n=6), followed by survey questionnaires.

Results (continued)

- SxD, as measured by ASEX, was at 70.5% (24/34) in females and 31.2% (5/16) in males, compared to 16% (4/50) in healthy controls, with statistically significant differences between all groups (Sukan et al.).
- In female patients only, SxD was associated with poorer quality of life (DLQI and CU-Q2oL) scores (p=0.02; Sanchez et al.).
- Female SxD, but not male, was also associated with poorer sleep quality; FSFI was 14.79 (SD 1.27) in the impaired sleep quality group compared with 19.90 (SD 2.64) in the normal sleep quality group (p=0.04; Sanchez et al.).
- Female patients with CU reported worse scores in body image, self-disclosure, sexual courage, and sexual self-confidence when compared with male patients, as measured by a sexual self-confidence scale and multidimensional body-self-relationship scale (p<0.05; Simsek et al.).

Conclusion

- CU is a chronic disease that is significantly associated with sexual impairment in both male and female patients.
- Sexual health burden from CU appears to be higher for women.
- Further investigation is needed to elucidate the differential impact of CU on sexual impairment by gender, which may have treatment implications.

References

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