

## Spontaneous Ejaculation Due to Duloxetine: A Case Report

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### ABSTRACT

*Ejaculation is controlled by both the sympathetic and parasympathetic system and consists of an emission and expulsion phase. Ejaculation latency time is regulated by the sympathetic system. Hypothetically, by reducing ejaculatory latency time, spontaneous ejaculation can occur. Extending the duration of ejaculation is a well-known side effect of antidepressants, especially selective serotonin reuptake inhibitors, serotonin and norepinephrine reuptake inhibitors and noradrenergic reuptake inhibitors. Adrenergic drugs are sometimes used as treatment for delayed ejaculation. A spontaneous ejaculation due to the use of these drugs has rarely been reported. Although most reports of spontaneous ejaculations are related to the use of venlafaxine and reboxetine, this study is based on a case of the side effect of duloxetine.*

**Keywords:** Duloxetine, serotonin and norepinephrine reuptake inhibitors, side effects, spontaneous ejaculation

### INTRODUCTION

Selective serotonin reuptake inhibitors, serotonin and norepinephrine reuptake inhibitors (SNRIs) and noradrenergic reuptake inhibitors (NRIs) can cause delayed ejaculation in men, delayed orgasm or anorgasmia in women, and the decreased libido in both men and women (1). Higgins *et al* (2) published an article about the sexual side effects and the incidence rates of these drugs. These drugs are commonly used for the treatment of premature ejaculation all over the world. Athanasios *et al* (3) reported the efficacy of duloxetine treatment in premature ejaculation by comparing 20 patients with premature ejaculation with a control group. Dapoxetine, the effects of which are similar to duloxetine, is also used for the treatment of premature ejaculation. Spontaneous ejaculation due to these drugs has rarely been reported. Although the results of the study are missing, the researcher reported a case with these side effects after increasing the dose of venlafaxine from 225 to 375 mg/day (4). In the literature, there have been two reported cases of spontaneous ejaculation due to reboxetine (5).

This study describes a case of spontaneous ejaculation due to duloxetine. The side effect diminished after the termination of the drug. The treatment was then

continued with venlafaxine (150 mg/day) and there was not the same side effect.

### CASE REPORT

A 35-year-old, married, male patient applied to our outpatient clinic with severe sadness, malaise, abdominal pain and headaches. His complaints started 7 years ago with serious diarrhoea, constipation and abdominal pain which increased strongly by the stress. He was diagnosed with ulcerative colitis. After this diagnosis, he began to feel seedier and had sleep problems and a burning sensation in his head, neck and lumbar region. Although his ulcerative colitis symptoms were under control, he was directed to the psychiatric clinic because of his complaints. He had no previous application to the psychiatric clinic, but he said that he sometimes used his mother's drug (50 mg/day lustral) for a few days whenever he felt bad. He has no other diagnosis except ulcerative colitis. His mother was diagnosed with anxiety disorder. He quitted smoking in 2003 and he did not use alcohol or any other drugs. In his mental status examination, he was conscious, cooperative and had full orientation, mild depression and anxious mood, reduced attention and concentration, sleep disturbance and decreased

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appetite and sexual desire. His functionality decreased but he had no suicidal idea.

He was diagnosed with somatization disorder and Cymbalta (duloxetine) treatment (30 mg/day) was started. After increasing the dose of Cymbalta (duloxetine) to 60 mg/day, he said that he benefited from the treatment but he started to suffer from spontaneous ejaculation which he initially did not pay attention to. But later, he said that because of this he stayed in a difficult situation. He did not want to terminate the drug because of its benefits. A decision was made to reduce the dose of Cymbalta (duloxetine) to 30 mg/day. Afterwards, his complaint of spontaneous ejaculation was decreased but he started to feel more depressed. For that reason, Cymbalta (duloxetine) treatment was terminated and venlafaxine treatment was started. After increasing the dose of venlafaxine from 75 to 150 mg/day, his complaints disappeared and he had no longer suffered from spontaneous ejaculation. His treatment continued without any problem for eight months.

## DISCUSSION

Selective serotonin reuptake inhibitors, SNRIs and NRIs might often cause delayed ejaculation and rarely spontaneous ejaculation. In the literature, there are case reports about spontaneous ejaculation due to paroxetine

and venlafaxine. This study reports a case about spontaneous ejaculation due to Cymbalta (duloxetine). After terminating duloxetine treatment and starting venlafaxine treatment, these side effects disappeared. This is probably dependent on the dosage of venlafaxine (150 mg/day).

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