# Letter to the Editor Paraphilia is an Untouched Research Topic in Bangladesh

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Date Received: 29th August 2019 Date Accepted: 28th September 2019

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# Introduction

term, Paraphilia was As а nosologically introduced in the third version of Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1987 (Beech et al., 2016). The latest version of DSM (DSM-5) defined paraphilia as "any intense and persistent sexual interest other than sexual interest in genital stimulation or preparatory fondling with phenotypically normal, physiologically mature, consenting human partners" (American Psychiatric Association, 2013). However, there are controversies regarding the definition and classification of paraphilia (Mc Manus et al., 2013; Beech et al., 2016). It can be classified as Exhibitionism/Exhibitionistic Disorder, Frotteurism/Frotteuristic

Disorder, Voyeurism/Voyeuristic Disorder, Fetishism/Fetishistic Disorder, Pedophilia/Pedophilic Disorder, Sexual Masochism/Sexual Masochism Disorder, Sexual Sadism/Sexual Sadism Disorder, Transvestic Fetishism, Not Otherwise Specified/Other Specified Paraphilic Disorder (Mc Manus et al., 2013; American Psychiatric Association, 2013). Prevalence of paraphilia has been varied because of variations in criteria over time and between cultures (Mc Manus et al., 2013). Prevalence studies have been conducted mostly in the developed countries and different studies revealed different prevalence rates (Mc Manus et al., 2013). Thus, the exact burden of paraphilia is yet to be estimated precisely across the globe.

Bangladesh is a rising economy of South-East Asia with about 160 million population yielding a high density where help seeking path for sexual disorders is obscure (Arafat & Ahmed, 2017; Ahsan et al., 2016a, Ahsan et al., 2016b). There is no specialized service center for patients with sexual disorders, resulting in increased sufferings to the patients as they visit multiple specialties (Ahsan et al., 2016b). There is dearth of studies on sexual disorders focusing the local population to create local evidences. Current article aims to review local evidences on paraphilia/paraphilic disorders in Bangladesh.

# Methods

Search was conducted in PubMed, PubMed Central, Google, Google Scholar, and BanglaJOL with following searching keywords without any date range.

#### Searching keywords

1. Paraphilia in Bangladesh 2. Pedophilia in Bangladesh3. Prevalence of paraphilia 4. Types of paraphilia in Bangladesh 5. Paraphilic disorders in Bangladesh 6. Exhibitionism/exhibitionistic disorder in Bangladesh 7. Zoophilia/ Zoophilic disorder in Bangladesh 8. Necrophilia/ Necrophiliac disorder in Bangladesh 9. Voyeurism in Bangladesh 10. Frotteurism in Bangladesh 11. Masochism in Bangladesh 12. Sadism in

Bangladesh 13. Fetishism in Bangladesh

# Results

The search did not reveal any research article on paraphilia in Bangladesh, except newspaper reports.

# Discussions

In Bangladesh, recently consultant centric personalized and specialized services for patients with sexual disorders have been started as few consultants of several specialties with special training on Sexual Medicine started practicing sexual medicine though the rate is sparse for the huge population. Moreover, existing myths on sex, sexuality, sexual health and sexual disorders have been playing role in seeking appropriate treatment for sexual disorders. Fortunately, in recent times some studies on sexual medicine and sexual dysfunctions have been published, some people have started to think and some physicians have started to acquire special training, expertise and practice. However, the current search revealed no article on paraphilia in Bangladesh. Personal communications with current sexual medicine practitioners revealed that occasionally they get patients with paraphilia and as per their personal opinion, pedophilia, exhibitionism and voyeurism are more in frequency than other

types. Local media reports were also found covering pedophilia (Mahmud, 2019; Dhaka Tribune, 2016). Frotteurism has been noticed inside the public transport of the city; however exact burden is yet to be measured (Brac University, 2018).

Bangladesh is a country with poor health literacy, dilapidated referral system, with abundant sexual myths and misconceptions where the main stream sexual dysfunctions are still under researched (Arafat & Ahmed, 2017; Ahsan et al., 2016a, Ahsan et al., 2016b). Thus, as expected no research on paraphilia in the country was found as expected. As a developing country, mental health, sexual health, and quality of life issues are yet to come to focus. Additionally, paraphilic behaviors are legally offensive to some extent and are considered as a punishable offense which hinders medical care seeking in many aspects in a country like Bangladesh. However, there is a strong possibility of having similar prevalence of paraphilic disorders like in other countries which brings hidden lifelong sufferings to the victims. This article is expected to draw attention of policy makers, psychiatrist, sexual medicine specialists, researchers, social scientists and other stakeholders so that the burden of paraphilia in Bangladesh could be estimated and appropriate measures could be ensured to reduce the sufferings of the patients as well as the victims.

Stakeholders such as sexual medicine practitioners, psychiatrists, psychologists, journalists, media persons, physicians, non-government organizations, and policy makers could take necessary steps to create awareness regarding sex, sexuality, sexual health, sexual disorders, sexual rights as well as to reduce the stigma in a country like Bangladesh. Possible collaboration of police and mental health professionals to address this issue can be an important step. National professional bodies such as Bangladesh Association of Psychiatrists (BAP) could take initiatives to conduct research as well as to create local evidences and formulate culture appropriate interventions. International bodies like South Asian Society for Sexual Medicine (SASSM), International Society for Sexual Medicine (ISSM) could communicate and collaborate with local bodies, local stakeholders and local researchers to address the issue.

#### **Declaration of Conflicting Interests**

The author declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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