

Sexual dysfunction in men included in Aldrete's survey: loss of libido (88%), partial impotence (63%), complete impotence (36%), 'difficulty arousing' (73%), penile pain during erection (38%).

Sexual function relies upon a delicate interplay between the sympathetic and parasympathetic nervous systems and also with some higher input (although the efficacy of the latter may diminish with age).

Sexual dysfunction may affect potency and ejaculation in men, as well as causing problems with orgasm in both sexes.

This may happen as a direct result of arachnoiditis scarring in the lumbosacral region (particularly the cauda equina) or may be related to treatment, particularly with antidepressant drugs.

Drugs that cause sexual dysfunction:

Those commonly taken by patients with arachnoiditis include:

- Alprazolam,
- amitriptyline,
- atenolol,
- baclofen,
- buspirone,
- carbamazepine,

- clonidine,
- diazepam,
- fluoxetine,
- gabapentin,
- indomethacin,
- methadone,
- mexiletine,
- naproxen,
- nefazodone,
- nortriptyline,
- oxybutynin,
- paroxetine,
- sertraline,
- trazodone,
- venlafaxine.

Note that SSRI drugs are particularly known for this problem. (See below under Treatment.)

Loss of libido may also result from depression.