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## Study of the efficacy of fluoxetine and clomipramine in the treatment of premature ejaculation after opioid detoxification

Abdollahian, E.<sup>a</sup>, Javanbakht, A.<sup>ac</sup>, Javidi, K.<sup>a</sup>, Samari, A.A.<sup>a</sup>, Shakiba, M.<sup>b</sup>, Sargolzaee, M.R.<sup>d</sup><sup>a</sup> Ibn E Sina Hospital of Psychiatry, Mashhad University of Medical Sciences, Mashhad, Iran<sup>b</sup> Department of Psychiatry, Zahedan University of Medical Sciences, Zahedan, Iran<sup>c</sup> No. 180, Banafsheh St., Sajjad Blvd., Mashhad, PC 91876, Iran

## Abstract

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Premature ejaculation is a common symptom that can provoke relapse in formerly opioid-dependent men after detoxification. The purpose of this study was to compare the efficacy of clomipramine and fluoxetine for the treatment of premature ejaculation in formerly opioid-dependent men after detoxification. Sixty opium-detoxified men with A & B DSM-IV diagnostic criteria for premature ejaculation participated in a prospective two-week descriptive inferential clinical trial after a two-week washout period. The subjects did not consume any other medications but naltrexone for maintenance of an opium-free state. The subjects were randomly divided into two groups of thirty subjects, one group received fluoxetine (10 mg/d for the first and 20 mg/d for the second week), and the other received clomipramine (25 mg/d for the first and 50 mg/d for the second week). Twenty five subjects did not continue the treatment and were lost to follow-up. The severity of the premature ejaculation was graded regarding the subjects' report in weeks 0, 1, and 2. Mann Whitney-U and Wilcoxon non-parametric tests were used for statistical analysis. Fluoxetine (10 mg/d then 20 mg/d) and clomipramine (25 mg/d then 50 mg/d) were both effective in the treatment of premature ejaculation and did not show any difference in efficacy. The severity of premature ejaculation did not show any relation to the subjects' age, education level, opioid type, or route of abuse. Fluoxetine and clomipramine both can be equally used in the treatment of premature ejaculation following opioid detoxification, depending on their side effects and other symptoms in the subjects. Copyright © American Academy of Addiction Psychiatry.

## Indexed Keywords

EMTREE drug terms: clomipramine; fluoxetine; naltrexone; opiate

EMTREE medical terms: adult; article; clinical article; clinical trial; controlled clinical trial; controlled study; diagnostic and statistical manual of mental disorders; disease severity; drug detoxification; drug efficacy; education; follow up; human; male; opiate addiction; premature ejaculation; randomized controlled trial; rank sum test; symptom; time series analysis; treatment withdrawal; unspecified side effect

MeSH: Adult; Antidepressive Agents; Clomipramine; Dose-Response Relationship, Drug; Ejaculation; Fluoxetine; Follow-Up Studies; Heroin; Heroin Dependence; Humans; Male; Opioid-Related Disorders; Opium; Prospective Studies; Serotonin Uptake Inhibitors; Sexual Dysfunction, Physiological; Substance Abuse Treatment Centers; Substance Withdrawal Syndrome; Treatment Outcome

Medline is the source for the MeSH terms of this document.

Chemicals and CAS Registry Numbers: clomipramine, 17321-77-6, 303-49-1; fluoxetine, 54910-89-3, 56296-78-7, 59333-67-4; naltrexone, 16590-41-3, 16676-29-2; opiate, 53663-61-9, 8002-76-4, 8008-60-4; Antidepressive Agents; Clomipramine, 303-49-1; Fluoxetine, 54910-89-3; Heroin, 561-27-3; Opium, 8008-60-4; Serotonin Uptake Inhibitors

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