Abstract

The hypersexuality recently entered the field of addiction. The sexual addiction is "a dependency relationship between a person and an abnormal or deviant sexual behavior." We are considering a treatment for this addiction, using two groups of 25 persons each; the first one being treated with he cognitive behavioral therapy and the second one .treated with the cognitive behavioral therapy and virtual reality. Better results should be registered for group 2.

The Treatment of Hypersexuality by Cognitive Behavioral Therapy and Virtual Reality

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Introduction

The sexual addiction is an abnormal sexual practice. It becomes the center of the subject's existence, by depriving him from other investments and without bringing him real satisfaction. This research project intends to explore the field of sexual addiction and a possible treatment for it. Several studies on sexual dysfunction treated with psychotherapy and virtual reality have shown that we obtain better results than if we use just the psychotherapy.

Virtual reality is an immersive interactive computer simulation, visual or haptic of real or imaginary environments. Virtual reality allows exposure under control to stimuli that can be complex and dynamic. It offers the possibility to graduate, repeat anxiogenic situations which can be many and varied.

The patient, as the therapist has the ability to stop the simulation immediately if he doesn't feel well. The attractive aspect of virtual reality and the ease of programming in the schedule of the patient limit the discontinuations and increase the chances of therapeutic success. Virtual reality offers interactive virtual environments by providing a space in which the patient becomes an actor.

Methods

Acoustic therapy (a CD with two voices that tell a story)
Cognitive behavioral therapy (CBT)
Virtual Reality (PC, joystick, headset)
2 groups-25 patients treated with CBT
-25 patients treated with CBT and Virtual Reality

Estimated results/

Given the proven effectiveness of virtual reality on other psychopathological disorders, our study aims to evaluate the therapeutic effect of virtual reality in patients treated with CBT and virtual reality compared to patients treated only by CBT.

The use of virtual reality should accelerate the process, should improve the person's condition until complete remission of symptoms.

Discussion

Normally after 25 sessions of CBT and virtual reality, we should see better therapeutic results than with CBT alone.

The only side effect found in studies of psychotherapy and virtual reality on sexual dysfunction was the dizziness. This can occur due to long exposure to virtual reality.

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