



A Case Report of Rare Paraphilic Interest: Emetophilia

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Abstract

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BACKGROUND: Paraphilic interest is when sexual arousal occurs in response to objects that are not part of normal sexual arousal. One of the rare paraphilic interests is emetophilia, in which an individual experiences sexual pleasure by observing people vomiting.

CASE REPORT: We report a 29 year old, unmarried woman, who came alone to the psychiatrist due to sexual arousal by observing others vomiting since childhood. The patient has never had sexual intercourse, so she does not know whether this condition affects her sexual activities or not. Meanwhile, she experienced job-related distress due to her illness.

CONCLUSION: Paraphilic interest or anomalous is one paraphilic disorder form which the person experiences less intense and frequent unusual sexual interest without significant distress or impairment in daily life. In this case, further evaluation concerning this patient's level of distress, including her sexual intercourse behavior, was still needed.

Introduction

Paraphilic interest is defined as sexual arousal from an unusual sexual activity or target. Besides, paraphilias are disorders characterized as sexual interest and fantasies in a unique activity or object, which became persistent and recurrent [1]. In DSM-5, paraphilias are classified into eight groups, including exhibitionism, sexual sadism, paedophilia, voyeurism, sexual masochism, fetishism, frotteurism, and transvestic fetishism. Other paraphilias are classified in DSM-5 in the residual diagnosis category of paraphilia (e.g., scatology, biastophilia, urophilia, scatophilia, hebephilia, and zoophilia). Classification of Diseases, Tenth Revision (ICD-10) recognizes six disorders of sexual preference (i.e., voyeurism, exhibitionism, fetishism, fetishistic transvestism, sadomasochism, and paedophilia) [2], [3], [4]. According to the American Psychiatric Association in 2013, paraphilia is not innately pathological or require clinical intervention unless if paraphilia invokes distress or any impairment on the lives of the sufferer or others, and later considered as a paraphilic disorder [5]. In DSM-5, the criteria of the paraphilic disorder require the patient to have experienced intense and recurrent arousal from their deviant fantasy for at least 6 months and to have acted on the paraphilic impulse. The occurrence of paraphilic behavior peaks between ages 15 and 25 and gradually declines [6].

Emetophilia is one of the rare sexual deviants in which an individual experiences sexual pleasure by vomiting or observing others vomit. Some emetophiles are aroused by the act of vomiting, and some others are aroused by hearing or seeing others vomit or even force their partner to vomit on them. In extreme cases, emetophiles are reported to practice by actually vomiting on a partner. This practice is called a Roman Shower, based on stories from Romans about their frequent vomiting behavior [7]. Here, we discuss a case of paraphilic interest of vomit or emetophilia in a woman.

Case Report

Ms. Y, 29 years old, unmarried woman, works as a nurse in a private hospital in Medan City, North Sumatera, Indonesia. The patient came alone to the psychiatrist with complaints of being sexually aroused by observing someone else vomiting. The patient said that she had felt this since childhood. Initially, she was pleased by seeing the vomiting scene on television. Patients also felt contented if schoolmates or people who seemed nauseous made vomit sounds and then threw up. In addition, to be pleased, the patient also felt a sensation in her pubic area, which she considered at

that age an urge to urinate. At that time, the patient did not realize that it was abnormal.

Over time, at the age of 15, when she started to access the internet and got to know YouTube, the patient recalled her pleasure in vomit, so she started to browse some videos showing people vomiting. The patient said that watching the videos remain pleasing, accompanied by unusual sensation through her genital continued with clear discharge through the vagina. From that moment, the patient realizes that it was sexual arousal. According to the patient, sexual arousal occurs when seeing and hearing someone's vomiting process, both men and women in various age ranges. However, the patient admitted that she preferred to witness adults vomiting rather than children or the elderly. The patient does feel more pleased if the vomiting process occurs naturally. The patient realized that sensation of satisfaction was also felt when watching someone in the video burp or cough hard and try to expel something through the mouth. The patient said that the act of vomiting herself did not arouse her. The patient has no desire to touch the vomit or go further than seeing and hearing the vomiting process.

In addition to videos, she also feels pleasure just by discussing and talking about vomiting with other people, especially her romantic partner. She also feels pleased just by imagining her partner vomiting.

The patient has never had sexual intercourse, so she does not know whether this condition affects her sexual activities or not. When she witnessed the vomiting process, she only felt pleasure and discharge from the vagina, without the desire to have sexual intercourse.

The patient denied any history of sexual abuse or childhood trauma related to sexual activity. The history of sexual deviance in parents is unknown. The patient does not know the trigger that underlies her condition. The patient claimed to have grown up in an environment with good religious and moral teachings without significant psychosocial stressors.

On a psychiatric examination through interviews, the patient was cooperative, speaking coherently with expected productivity. At the beginning of the interview, the patient seemed a little gloomy and worried to share her complaints. Memory, attention, and other components of cognition were in good condition. There were no disturbances in motor behavior, thought processes, thought continuity, thought content, or perceptual disturbances in the patient. The patient admitted that she sometimes dreams about others vomiting. On general physical examination, all results were within normal limits.

The patient began to feel distressed about her condition because she worked as a nurse, and she frequently feels aroused when she observed people vomiting at work. The patient admitted that she becomes more encouraged to browse videos related

to people vomiting, especially in a stressful event. The patient feels embarrassed and worried about her condition, considering this was unusual, especially for Muslim women. The patient hides the disorder from anyone and feels anxious if her partner knows it. Finally, the patient decided to visit a psychiatrist and seek professional help.

The patient was considered as having paraphilic interest, specifically emetophilia. Therefore, the psychiatrist recommended to perform Cognitive Behavioral Therapy (CBT) on the patient. The CBT was conducted in several sessions.

Discussion

In the 2013 DSM-5, sexual interest is classified as normophilic or paraphilic. Paraphilic sexual interest is defined as a sexual interest in unusual preferences. It can range from nearly normal behavior to highly destructive behavior [6]. It is known to take three forms: (a) Paraphilic disorder in which the personal interest is recurrent, intense, and causes significant impairment, for at least 6 months (b) paraphilia, in which the person interest is recurrent and more intense than normal, but does not lead to significant impairment. (c) Paraphilic interest or anomalous, in which the person interest is less persistent and less intense than paraphilia [3], [8], [9].

Paraphilic interest has been reported both in men and women, involving a variety of paraphilic activities. However, women are rarely seen as concerns about their sexual interests or misbehaviors, leading to some conclusion that paraphilias are much more common among men than women [1], [6].

In this case, after a comprehensive psychiatric interview and general examination, it is known that the patient was considered as having a paraphilic interest in vomit or emetophilia. The patient admitted that she had experienced this since childhood, even though it never really caused significant distress or impairment. In this case, the patient has exceeded the minimum time required to be diagnosed with paraphilic disorder according to DSM-5. Still, the diagnosis of paraphilic disorder should not be applied if the patient has not acted on the fantasy or causing marked distress, interpersonal difficulty, or job-related difficulty. It still needs further evaluation concerning this patient level of distress, including her sexual intercourse behavior, even though she directly expressed her job-related discomfort [9], [10].

Several studies explain the biological factors in a person with paraphilia, including hormonal abnormality and chromosomal abnormalities, but there is still no certainty whether these abnormalities are causally

related to paraphilic interests. In the psychoanalytic aspect based on the psychosexual theory from Sigmund Freud, persons with paraphilia have failed to complete the normal developmental process toward sexual adjustment, and what distinguishes one paraphilia from another is the method chosen by an individual to cope with the anxiety caused by the threat of castration by the father and separation from the mother [6], [11]. For emetophilia, Freud also described vomiting as a substitute for moral and physical disgust. For these particular paraphiliacs, it has been claimed that the "spasm, ejaculation, relief" sequence in vomiting is erotically charged [7].

The treatment of paraphilia and paraphilic disorder is generally classified into five types: external control, reduction of sexual drives, treatment of comorbid conditions (e.g., depression or anxiety), cognitive-behavioral therapy, and dynamic psychotherapy. Cognitive-behavioral therapy is used to repair learned paraphilic patterns and modify the behavior. The interventions contained imaginal desensitization, relaxation technique, and learning what triggers the paraphilic impulse. Understanding psychodynamics and the events that caused the paraphilia to develop, insight-oriented psychotherapy may be a good choice for treating paraphilia [6].

Conclusion

Paraphilic interest or anomalous is one paraphilic disorder form which the person experiences less intense and frequent unusual sexual interest without significant distress or impairment in daily life. In this case, further evaluation concerning this patient's level of distress, including her sexual intercourse behavior, was still needed.

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