



<p>Zencius et al. (1990). Managing hypersexual disorders in brain-injured clients. <i>Brain Inj</i>, 4(2): 175-181.</p>	<p>RoBiNT score - 13/30</p>
<p>Method / Results</p>	<p>Rehabilitation Program</p>
<p>Design</p> <ul style="list-style-type: none"> • Study Type: SCD. <ul style="list-style-type: none"> ○ Participant 1: ABC design (A= baseline, B=half-hour feedback, C= evening feedback). ○ Participant 2: ABA (A=baseline, B=treatment package). ○ Participant 3: AB (A=baseline, B=stimulus control). • Population: n=3. <ul style="list-style-type: none"> ○ Kathy: female, age 19, sustained a closed head injury following a motorcycle accident. Left hemiparesis and mild dysarthria. ○ Jack: male, age 32, sustained a head injury following a motor vehicle accident. ○ Gary: male, age 24, sustained a head injury following a motor vehicle accident. He was in a coma for 2 weeks. • Setting: Not specified. <p>Target behaviour measure/s:</p> <ul style="list-style-type: none"> • Kathy: Reduction in sexual activity operationally defined as touching or sitting within 1 foot of a member of the opposite sex. • Jack: Reduction in frequency of exhibitionism, operationally defined as exposing himself to a female. • Gary: Reduction in frequency of inappropriate touching, operationally defined as kissing females or giving back rubs. <p>Results: For Kathy, inappropriate touching was eliminated through scheduled feedback which started at half-hourly intervals and faded to once daily. For Jack, two episodes of exhibitionism occurred during baseline, and one occurred since implementation of the treatment package. Gary's frequency of inappropriate touching dropped from an average of 6.5 times per day (baseline), to 1.5 times per day. No statistical analysis reported.</p>	<p>Aim: To decrease hypersexual behaviour following brain injury.</p> <p>Materials: Specific materials unclear. Data sheet used to record intervals of behaviour.</p> <p>Treatment Plan:</p> <ul style="list-style-type: none"> • Duration: Kathy: Approximately 20 days. Jack: 15 weeks. Gary: Approximately 25 days. • Procedure: Differed per participant, as outlined below. • Content: • Kathy: Staff observed interactions occurring in public spaces when patient engaged with members of opposite sex. Scheduled feedback provided every half hour by staff; contained information on whether patient's interactions were appropriate or inappropriate. During evening feedback sessions, staff showed data sheet with intervals scored as appropriate sexual behaviour and provided feedback to the participant. • Jack: The patient was provided with a notebook to self-monitor all urges and feelings. He was told to record his urges in the notebook, and then masturbate to fantasies of situations presented in a dating skills training class. Dating skills training class involved roleplaying with two female therapists, e.g. asking females on a date, or calling on the telephone. • Gary: The patient was allowed to give back rubs under certain stimulus conditions – only during a scheduled relaxation class. All clients and staff enrolled in the class could receive back rubs. On the occasions he tried to touch peers or staff outside of the relaxation class, he was reminded that back rubs were to be given during class only.

Note that these rehabilitation summaries reflect the current literature and the treatments are not necessarily endorsed by members of the NRED Team.