**Antidepressants can affect sex drive – after you stop**

**Expert: Could be a lifelong problem**

Journalist: Katarina Forsberg Published 2025-05-11 17.00

Antidepressants can cause sexual dysfunction, even after you have stopped taking the medication.

A new study shows that this also applies to young people.

"It has taken time for this problem to get attention," says doctor André Marx.

1.2 million Swedes collected antidepressants in 2023. So-called SSRIs for depression can cause long-term sexual dysfunction, according to new research published in Social Psychiatry and Psychiatric Epidemiology.

PSSD, post SSRI sexual disorder, is a medical condition recognized by the European Medicines Agency, EMA.

"It was first noticed in 1991," says André Marx, a specialist in general medicine at a health center in Stockholm.

He worked for a few years at Björkhagen's health center, where they helped patients taper off antidepressants, a clinic that is now closed.

"Emotional numbness is a known side effect of SSRIs, but also a lack of sexual desire with reduced sensation, for example, erectile dysfunction and difficulty reaching orgasm," says André Marx.

"Because there has been a lack of interest in mapping the extent of the problem, we do not know how common it is. It is likely to be an underdiagnosed problem with a large number of patients who have everything from mild to severe PSSD.

**Doesn't want to talk about sexual side effects**

The new study analyzed 9,679 responses to questions asked of people aged 15 to 29 living in Canada and the United States.

95 percent stated that they belonged to a sexual or gender minority.

2,179 had used some form of psychiatric medication and had also been sexually active.

The participants were asked if they had experienced "less sensation in the genitals during sex" and if the symptoms had continued after they stopped taking the medication.

13.2 per cent reported sexual dysfunction after stopping medication in the group that had taken antidepressants, while the figure for other types of medication was one per cent.

"It's a questionnaire study, and the study design means that the results are more unreliable. But my experience is that there is a clear resistance from patients to talk about sexual side effects.

**Can have consequences for young people**

Last year, André Marx wrote the book "Beloved Hated Antidepp", (Mondial) in which he argues that SSRIs are prescribed too lightly.

"A growing proportion of young children and teenagers receive these medications. It's during a time when you have to get to know and develop your own sexuality," he says and continues:

"At least 50 per cent have problems with their sex drive and sexual ability when they take this medicine, and if they are young, it can have far-reaching consequences if they have not been able to explore this side of themselves.

Magnus Ingelman-Sundberg, senior professor of molecular toxicology, thinks that the study has several limitations.

"It is based on self-reporting via the internet, which can often entail certain limitations scientifically, including misremembering or having subjective interpretations that cannot be objectively verified.

Magnus Ingelman-Sundberg also believes that the study does not analyse the connection between genital hypoesthesia and other sexual side effects.

"It is also not clear how long the symptoms were.

Sexual dysfunction is the most common side effect of SSRI treatment.

"Unfortunately, this often leads to a lack of compliance in treatment. The category of sexual dysfunction includes impaired sensation in the genital area during ongoing treatment. Similar symptoms can also occur in cases such as nerve damage, diabetic neuropathy and psychological factors that affect the sensory experience," says Magnus Ingelman-Sundberg.

Magnus Ingelman-Sundberg believes that sexual dysfunctions during treatment are a greater clinical problem than the effects seen after stopping the drugs.

**Could be a lifelong problem**

If you experience a sexual dysfunction from SSRIs, there is not much to do.

"It's just a matter of waiting and seeing. For some, it becomes a lifelong problem even after they have stopped taking medication," says André Marx.

For some, it seems to be gradually getting better, he says.

"Despite being well aware of the problem, pharmaceutical companies have tried to downplay it instead of researching it. This is an important reason why we do not know how common the side effect is, what it is due to and whether it can be remedied," says André Marx, who thinks that the patients are left to their own fate.

**Facts: SSRIs**

**Selective serotonin reuptake inhibitors, SSRIs, increase the level of serotonin in the brain. It is the most commonly used type of antidepressant and can also work for various types of anxiety.**