Evidence based answers: could sildenafil cause rape?

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The setting
Mr LD, 48 years of age, presented with long standing impotence. He was concerned this would adversely affect the relationship with his new girlfriend of 3 weeks. Initial evaluation included history and physical examination. Relevant pathology tests did not reveal an obvious cause for his impotence other than past depression.

‘What about Viagra, doc?’ he asked, ‘She’s going to leave me if I don’t do something’.

My concern was that I knew he was on parole from a 5 year prison sentence for raping his ex-wife. Management options had to be discussed. I deferred this decision to give myself time to think about the complex issues, and asked him to come back in 2 weeks.

Asking the question
I considered the ethical and information issues – at least if I gain some evidence based knowledge, I should be better able to wrestle with the ethical dilemmas. The important questions seemed to be:
• can sildenafil cause an increased risk of rape?
• should this man’s prison and psychiatric history influence my prescribing?
I raised the problem at our weekly clinical question answering club (C-QAC), and it provoked an interesting discussion. The resulting question formulation for a literature search was as follows: among impotent convicted male rapists (Patient), what is the chance that sildenafil (Intervention) would be more likely than no impotence treatment (Comparison) to lead to rape (Outcome)?

Applying the evidence
The search showed that other people had been concerned with the same issue, although with different motivations. Before conducting the search, my concern was that sildenafil would facilitate penile rape by enabling Mr LD to gain an erection. It had not occurred to me that sildenafil may cause aggression. However, it found no empirical evidence of a causal relationship between sildenafil and rape. We did not search legal databases, although it appeared from the article as though sildenafil has not been successfully used as a defence in a rape case.

While Mr LD returned, he expressed concerns about how the parole board would view him taking sildenafil, therefore we are presently focussing on the relationship and psychological aspects of his erectile dysfunction.

Discussion
While the search for evidence did not lead me to research that answered my question, the process of searching clarified the issues and expanded the scope of my thinking. It was also helpful to me that our practice has a forum (the C-QAC) in which to discuss these difficult cases.

Acknowledgment
I would like to thank Professor Chris Del Mar for his help in preparing this article.

Conflict of interest: none declared.

Reference