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## Medication and alcohol in nursing homes

Furniss *et al* (2000) report the findings from a promising trial which addresses the inappropriate use of medication in nursing homes. They conclude that a pharmacist's review followed by a reduction in medication does not necessarily increase rates of morbidity or mortality. However, one commonly used drug that was not included in their review was alcohol.

Significant rates of alcohol misuse have been recorded in nursing home settings (Johnson, 2000), and interactions between prescribed (as well as over-the-counter) medication and alcohol pose significant risks for older people drinking unregulated amounts of alcohol. Alcohol interacts with many of the commonly prescribed medications cited in the study, especially antidepressants and sedatives. Therefore, residents in the study who drink alcohol will have benefited from the intervention of stopping medication by removing the risk of a potentially dangerous drug reaction.

As part of a survey in Bristol, I approached the managers of several residential homes to find out whether they held a policy regarding alcohol use in the home.

None of the seven homes surveyed had such a policy in place, despite some residents having alcohol problems, and it was not unusual for homes to sell alcohol on the premises, either across a bar or in a shop.

Pharmacists have a key role in advising patients of potential interactions with alcohol (Ward, 1997). The provision of clear and up-to-date information about these interactions could form part of an alcohol policy in nursing and residential homes.

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## Talmudic, Koranic and other classic reports of stalking

Kamphuis & Emmelkamp's (2000) review on stalking gives an acute clinical perspective to the Hebrew myth of Joseph and Zuleika related in Genesis XXXIX. After being sold as a slave, Joseph became the target of his master's wife's wanton passion. He steadfastly rejected all her amorous advances and was eventually condemned to prison on account of her calumnies.

This archetype of stalking has many derivations in Jewish, Arabic, Syriac, Persian, Indian and medieval European lore (Rappoport, 1995). Talmudic and midrashic accounts emphasise the complex behavioural sequence of the stalker: implicit seductive manoeuvres; explicit proposals; verbal menaces; planned physical aggression; false accusations; humiliation and punishment.

Moslem tradition, based on Mohammed's twelfth sura, elaborates on the erotomanic aspects of the myth. Yusuf was also in love with Zulaikha, but had no hope of reciprocity. When Yusuf had been freed from prison and appointed in the place of his former master, he married his widowed former mistress and stalker (Weil, 1845). Islamic comments also acknowledge Zulaikha's love as her only excuse. This theme of the stalkee's irresistible charm, already explicit in the Koran, is refined by Persian poets such as Firdusi (933–1025)

and especially Jami (1414–1492), whose powerful metaphor of the 'fair gazelle' applied to Yusuf conveys the ambivalence of feminine grace and quick escape (Jami, 1882). Ephrem Syrus addresses the stalker's distorted insight: "Out of love for him, I treated him unjustly; and yet he owes his present greatness to us" (Grünbaum, 1901).

Christian authors tend to draw a parallel between Joseph and the Saviour. Emphasis is therefore placed on forgiveness by the stalk-ee. The stalker's insight is finely verbalised in 14th-century passion plays: "Principallement une dame / Comme moy; je suis esbahye / Je considère ma follye / Mais, bref, amour me contrainct tant / Qu'il sera force que je prie / Joseph pour estre mon amant" (Anonymous, 1881). In 16th-century Yiddish dramas composed for Purim, a festival celebrating the liberation of Jews from a deadly plot, the slave's and the mistress's alienation and freedom are dialectically discussed and Joseph's stalker goes by many different names (but not Zuleika). Zuleika's syndrome is also staged with other nuances by Goethe and in a famous Broadway show. This overview reinforces Kamphuis & Emmelkamp's view of a typical phenomenon which has remained a contemporary challenge, and also their suggestion of cultural biases in the perception of stalking.

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## Venlafaxine-induced painful ejaculation

Antidepressant drugs cause a variety of sexual side-effects. Painful ejaculation is a

rarely reported side-effect of antidepressants, especially the newer drugs.

A 59-year-old man with recurrent depression had normal sexual function while euthymic and mild decrease in libido while depressed. Although his previous episode of depression responded well to fluoxetine he was not keen on trying it again because of fluoxetine-associated diarrhoea. During a depressive relapse he was treated with venlafaxine 75 mg daily which was later increased to 150 mg daily. The antidepressant response was good. Unfortunately, he developed painful ejaculation. It was sharp and burning in nature and located deep in the shaft of the penis. It would begin just before ejaculation and lasted until the penis became flaccid. This was so unpleasant that it not only interfered with the pleasure of intercourse, but also led him to avoid sexual intercourse. The pain persisted despite reducing the dose of venlafaxine to 75 mg. When venlafaxine was stopped the pain disappeared. Later, he made a good recovery on citalopram 40 mg daily.

He denied experiencing pain or any other sexual side-effects and also denied having ever previously experienced painful ejaculation.

This is the first report of venlafaxine-induced painful ejaculation. Painful ejaculation/orgasm have been reported with various tricyclic antidepressants (Kulik & Wilbur, 1982; Aizenberg *et al*, 1991). Some of the people in question improved with dosage reduction or after changing to other tricyclics, but others improved only when they stopped the medication. Hsu & Shen (1995) reported a case of fluoxetine-induced painful ejaculation that improved when the dosage was reduced from 20 mg daily to 20 mg on alternate days. Thus, painful ejaculation, when it occurs, could be a dose-dependent side-effect in some individuals. It has been suggested that partial blockade of peripheral sympathetic adrenergic receptors could interfere with coordinated contractions of smooth muscles involved in semen transport and thus induce painful spasms or retrograde ejaculation (Kulik & Wilbur,

1982). However, venlafaxine has little if any adrenoceptor-blocking action. Thus, the mechanism of antidepressant drug-induced painful ejaculation remains elusive.

Sexual side-effects of antidepressant drugs cause distress, strain relationships, impair quality of life and reduce compliance with treatment. Enquiring routinely about side-effects, especially sexual side-effects, of antidepressants would help to improve compliance with treatment.

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## One hundred years ago

### The duties of an asylum superintendent

A RECENT number of the *Portadown News* (May 19th) contains an account of the monthly meeting of the Board of Management of the Lunatic Asylum at Portadown, at which various opinions were expressed by the members concerning what they conceived should be the duties of a medical superintendent. Among such duties – in addition to the professional duties – expected of the medical superintendent appeared the following: keeping the subsidiary financial account of the institution, the care and supervision of china and crockery, and the planting of potatoes. The question of acquiring additional land was negatived [*sic*] as the committee were unanimously of opinion – considering that Mr G. R. Lawless (the resident medical superintendent) did not know when potatoes should be planted – that there was no need of additional land. Among other things which fell

within the medical superintendent's province was the selling of old clothes belonging to the patients as ordered by the board, though he (the medical superintendent) was of opinion that such clothes should be destroyed. On the motion of Mr Best, seconded by Mr Armstrong, "the board further instructed the medical superintendent to have mortar made on the grounds," and to keep a supply of the same for the needs of the institution. A member of the committee inquired if they could feed more pigs than they had at present and Mr Lawless replied that they had not accommodation for more. The *Portadown News* concludes its report as follows concerning the committee and their doings: "After the meeting was over several of the governors visited the piggeries, and on finding that a number of them (the pigs) were over two hundredweight and that in the ordinary course it would be two months before they could be disposed of by tender, it is said that some unprintable expressions were

used regarding the management of the institution in general." It appears clear that the medical and professional duties required to be performed by the medical superintendent as the responsible physician in charge of the patients and of the administration of the asylum could not be performed were he to have to do the other work required by the committee. Evidently some of the committee think that the superintendent should be made a beast of burden and a jack-of-all-trades – a state of things which is not conducive to the best interests of the public asylum service if a medical officer in charge of patients is required to do the work of a steward, an accountant-clerk, a farm-bailiff, a housekeeper, and a manager of the piggeries.

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