QUESTION

Should enquiring about sexual function including erectile or vaginal lubrication dysfunction vs. no enquiry be used for all sexually active people with Friedreich ataxia?

POPULATION: all sexually active people with Friedreich ataxia

INTERVENTION: enquiring about sexual function including erectile or vaginal lubrication dysfunction

COMPARISON: no enquiry

MAIN OUTCOMES: Presence of erectile dysfunction; Presence of inadequate vaginal lubrication; Quality of life; Improved intimate relationships;

ASSESSMENT

o Trivial

o Small

o Largeo Varieso Don't know

Moderate

ASSESSMENT						
Problem Is the problem a priority?						
JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS				
o No o Probably no o Probably yes ● Yes o Varies o Don't know	Data from the FA Clinical Outcome Measures (FA-COMS) registry found 3.3% (15/456) females and 6.8% (30/439) males reported sexual dysfunction (Lynch, 2017). Two studies exploring sexual dysfunction in FA: Sexual dysfunction reported in 30/36 (83%) of individuals with FA (Lad et al, 2017) Sexual functioning, sexual satisfaction and the capacity to form intimate relationships is impacted by FA as evident by: erectile dysfunction reported in 57% (20/35) of males, inadequate vaginal lubrication interfering with sexual responsiveness in 57.7% (26/45) of females, and reduced genital sensation in 47% (51/107) of people with Friedreich ataxia. In addition, 88% (94/107) reported problems moving their body during sexual activity and 73%, (78/107) reported reduced confidence about their sexuality due to FRDA. (Corben et al, 2021)	The Friedreich's ataxia Clinical Management Guideline Patient and Parent Advisory Panel were interviewed on the consequences, urgency and priority of the topic. 3/7 indicated disturbance of sexual function was probably not serious, 3/7 indicated probably serious, 1/7 indicated didn't know if serious. 4/7 indicated disturbance of sexual function was probably not urgent, 1/7 indicated probably urgent, 2/7 indicated didn't know if urgent. 3/7 indicated disturbance of sexual function was probably not a priority, 1/7 indicated probably a priority, 2/7 indicated didn't know if a priority, 1/7 indicated varies/sometimes a priority. (Aug 2020).				
Desirable Effects How substantial are the desirable anticipated effects?						
JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS				

Given the findings of two studies exploring sexual function in

dysfunction is moderate.

FRDA the desirable anticipated effects of enquiry about sexual

A search of four databases (CENTRAL, MEDLINE, EMBASE, CINAHL) identified no randomized, non-

further published evidence meeting the search criteria was identified in the Consensus Clinical

Management Guidelines for Friedreich's ataxia, 2014.

randomized controlled, cohort and case studies published from 2014 through to 15 October 2020. No

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Undesirable Effects How substantial are the undesirable anticipated	effects?					
JUDGEMENT	RESEARCH EVIDENCE		ADDITIONAL CONSIDERATIONS			
o Large o Moderate o Small o Trivial o Varies ● Don't know	A search of four databases (CENTRAL, MEDLINE, EMBASE, CINA randomized controlled, cohort and case studies published from further published evidence meeting the search criteria was ide Management Guidelines for Friedreich's ataxia, 2014.					
Certainty of evidence What is the overall certainty of the evidence of o	effects?					
JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS				
Very low County Moderate High No included studies	No published evidence.					
Values Is there important uncertainty about or variability in how much people value the main outcomes?						
JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS				
o Important uncertainty or variability o Possibly important uncertainty or variability o Probably no important uncertainty or variability • No important uncertainty or variability	Outcomes					
	Presence of erectile dysfunction - not measured	IMPORTANT ³ -				

Presence of inadequate vaginal lubrication - not measured	IMPORTANT ^b	-
Quality of life - not measured	IMPORTANT	-
Improved intimate relationships - not measured	IMPORTANT ^d	-

- a. Identified as important (4/6), low importance (1/6) and requiring more information (1/6) by people with FA and important by expert authors on the topic.
- b. Identified as important (3/6), low importance (2/6) and requiring more information (1/6) by people with FA and important by expert authors on the topic.
- c. Identified as critical (2/6), important (4/6) by people with FA and important by expert authors on the topic.
- d. Identified as critical (2/6), important (2/6), low importance (1/6) and requiring more information (1/6) by people with FA and important by expert authors on the topic.

Balance of effects

Does the balance between desirable and undesirable effects favor the intervention or the comparison?

JUDGEMENT RESEARCH EVIDENCE		ADDITIONAL CONSIDERATIONS
o Favors the comparison	Expert opinion based on five clinicians favours the intervention despite no published evidence.	
 Probably favors the comparison 		
O Does not favor either the intervention or the		
comparison		
 Probably favors the intervention 		
o Favors the intervention		
o Varies		
o Don't know		

Acceptability

Is the intervention acceptable to key stakeholders?

JUDGEMENT	RESEARCH EVIDENCE	ADDITIONAL CONSIDERATIONS
o No o Probably no ● Probably yes o Yes	No published evidence.	The Friedreich's ataxia Clinical Management Guideline Patient and Parent Advisory Panel were asked if the intervention was acceptable (weighing up the balance between benefits, harms

o Varies o Don't know	and costs).
O DON'T KNOW	2/5 indicated enquiring about sexual function for all sexually active people with FA was probably reasonable, 1/5 indicated varies or sometimes reasonable, 2/5 indicated didn't know if reasonable. (Aug 2020).

SUMMARY OF JUDGEMENTS

	JUDGEMENT						
PROBLEM	No	Probably no	Probably yes	Yes		Varies	Don't know
DESIRABLE EFFECTS	Trivial	Small	Moderate	Large		Varies	Don't know
UNDESIRABLE EFFECTS	Large	Moderate	Small	Trivial		Varies	Don't know
CERTAINTY OF EVIDENCE	Very low	Low	Moderate	High			No included studies
VALUES	Important uncertainty or variability	Possibly important uncertainty or variability	Probably no important uncertainty or variability	No important uncertainty or variability			
BALANCE OF EFFECTS	Favors the comparison	Probably favors the comparison	Does not favor either the intervention or the comparison	Probably favors the intervention	Favors the intervention	Varies	Don't know
ACCEPTABILITY	No	Probably no	Probably yes	Yes		Varies	Don't know

TYPE OF RECOMMENDATION

Strong recommendation against the intervention	Conditional recommendation against the intervention	Conditional recommendation for either the intervention or the comparison	Conditional recommendation for the intervention	Strong recommendation for the intervention
0	0	0	0	•

CONCLUSIONS

Recommendation

We recommend clinicians enquire about sexual function, including but not limited to erectile or vaginal lubrication dysfunction, the physical capacity to engage in sexual activity and the psychological aspect of the sexual response in sexually active individuals with Friedreich ataxia.

Justification

There are two recent published studies that indicate sexual dysfunction is a greater issue in individuals with Friedreich ataxia than those without (Corben et al, 2021; Lad et al, 2017). It is important that the clinician enquires about the possibility to ensure appropriate intervention can be implemented aimed at improving intimate relationships.

Subgroup considerations

This recommendation is for sexually active individuals with Friedreich ataxia.

Research priorities

Further studies are required to confirm the findings of the first two studies regarding the incidence and extent of reported sexual dysfunction in individuals with Friedreich ataxia.

References

Corben LA, Hermans MM, Marks A, Crowe LM, Delatycki MB. Sexual function, intimate relationships and Friedreich ataxia. J Neurol. 2021;268(3):1088-95.

Lad M, Parkinson MH, Rai M, Pandolfo M, Bogdanova-Mihaylova P, Walsh RA, et al. Urinary, bowel and sexual symptoms in a cohort of patients with Friedreich's ataxia. Orphanet J Rare Dis. 2017;12(1):158.

Lynch D. FA Clinical Outcome Measures (FA-COMS) Registry (unpublished data): clinicaltrials.gov; 2017 [Available from: https://clinicaltrials.gov/ct2/show/NCT03090789