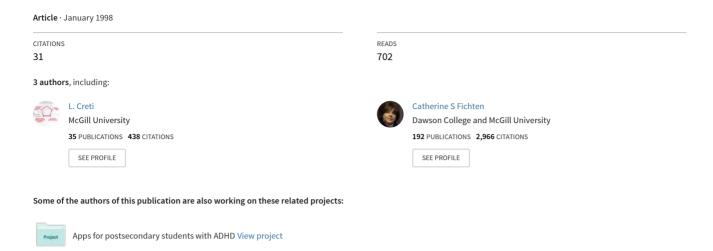
Global sexual functioning: A single summary score for Nowinski and LoPiccolo's Sexual History Form (SHF)



- 20. a. Sometimes I care more about my boyfriend's feelings than my own.*
 - b. It is important to me that I am as satisfied with a relationship as my partner is,
- 21. a. Most women need a man in their lives.*
 - b. I believe some women lead happy lives without male partners.
- 22. a. When a man I'm with gets really sexually excited, it's no use trying to stop him from getting what he wants."
 - b. Men should be able to control their sexual excitement.
- 23. a. I like to have a man "wrapped around my finger."*
 - b. I like relationships in which both partners are equal.
- 24. a. I try to avoid jealousy in a relationship.
 - b. Sometimes women need to make men feel jealous so they will be more appreciative.*
- 25. a. I sometimes promise to have sex with a man to make sure he stays interested in me.*
 - b. I usually state my sexual intentions honestly and openly.
- 26. a. I like to feel tipsy so I have an excuse to do anything with a man.*
 - b. I don't like getting too drunk around a man I don't know very well.

Source. This scale was originally published in "Hyperfemininity: Measurement and Initial Validation of the Construct," by S. K. Murnen and D. Byrne, 1991, The Journal of Sex Research, 28, 479-489. Reprinted with permission.

*Indicates the hyperfeminine choice.

Global Sexual Functioning: A Single Summary Score for Nowinski and LoPiccolo's Sexual History Form (SHF)

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The Sexual History Form (SHF; Nowinski & LoPiccolo, 1979; Schover & Jensen, 1988) is a widely used multiple-choice questionnaire evaluating the frequency of sexual activity; sexual function relating to desire, arousal, orgasm,

and pain; and overall sexual satisfaction for men and women. Originally developed for clinical use and to provide standardized data for diagnosis and research (Schover, Friedman, Weiler, Heiman, & LoPiccolo, 1982), the SHF has been widely used in sex therapy clinics, in clinical studies of sex therapy outcome (Fichten, Libman, Takefman, & Brender, 1988; Schover & LoPiccolo, 1982; Trudel, Ravart, & Matte, 1993), and in longitudinal assessments of the impact of chronic illness on sexuality (Schover, Fife,

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& Gershenson, 1989; Schover, Novick, Steinmuller, & Goormastic, 1990; Schover et al., 1995).

In its present format, the SHF provides a very detailed self-report assessment of sexual behavior and function. It has been used in an item-by-item fashion to describe sexual problems in a particular population or to compare sexual function before and after a medical intervention. A limitation of the SHF for research has been the lack of a reliable and valid global score that could measure differences in overall sexual function between groups or across time.

To enhance the utility of the SHF, we developed a new scoring system that generates a single summary score: global sexual functioning (Creti, Fichten, Libman, Amsel, & Brender, 1988; Creti, Fichten, Libman, Kalogeropoulos, & Brender, 1987). The global sexual functioning score is easy to calculate, and concisely and accurately reflects overall level of sexual functioning. The single score also permits results from different investigations to be more readily compared.

Description

The SHF is a self-report sexual history measure. The original version consisted of 28 items; the latest version has 46. The format of the measure is multiple choice; items have variable numbers of response options and different response scales (e.g., Item 1 has nine options, with 1 = more than once a day and 9 = not at all; Item 18 has six options, with 1 = never and 6 = nearly always [over 90% of the time]). Response options are numbered from 1 to 4, 1 to 5, 1 to 6, or 1 to 9 and have a verbal descriptor corresponding to each number. The measure is typically scored on an item-by-item basis, resulting in 46 variables. Normative data for most items are presented in Schover and Jensen (1988); these are based on 92 couples in stable relationships who responded to an advertisement in New York in 1980. The mean age of the sample was in the early 30s, and they were predominantly Caucasian and middle class. Comparative item data from other samples can be found in Libman, Fichten, Creti, Amsel, and Brender (1986), LoPiccolo (1981), Nowinski and LoPiccolo (1979), and Weinstein et al. (1989).

Response Mode and Timing

Respondents circle the number that corresponds to the single most appropriate response for each question. The measure requires approximately 15 minutes to complete.

Scoring

The global sexual functioning score is calculated using 12 of the original 28 items (items have been renumbered in the current 46-item version). Because certain items are relevant only for males, whereas others are relevant only for females, the items used to calculate the male and female global sexual functioning score are somewhat different. The 12 items were selected as representative of various domains of sexual functioning: frequency of sexual activities, sexual desire, arousal, orgasmic, and erectile abilities.

To arrive at the single summary score, SHF items are grouped into a 12-item scale; this reflects either male or female global sexual functioning. The single summary score is derived by (a) converting the scores on each of the 12 items to a proportion of the maximum possible value, for example, if on Item 1, where response options are numbered 1 to 9, the respondent answers "(4) twice a week," this is converted to 4/9 = .44; (b) summing the 12 proportions; and (c) calculating the mean by dividing the total by the number of items which the respondent is deemed to have answered (usually 12). The resulting mean value, which is the global sexual functioning score, will be greater than 0 and less than 1. The calculation can be easily carried out using a calculator.

Specified in Table 1 are the items included in the calculation of the global sexual functioning score. For items with an asterisk, responses equaling 6 are considered missing because this response option is have never tried; in this case, the summed proportions are divided not by 12 but by the number of items that are deemed to have been answered (i.e., not missing). The scoring system is summarized in Table 1. Lower scores indicate better functioning.

Table 1 Calculating the Global Sexual Functioning Score

Male		Fer	nale
Item no.	Divide by	Item no.	Divide by
1	9	1	9
2	9	2	9
6	9	6	9
7	9	7	9
10	6	16	5
16	5	23*	5
18	6	24*	.5
19	6	25*	.5
22	6	26*	.5
23*	5	27*	5
24*	5	29	6
25*	5	37°	5

Note. Score as follows: (a) convert scores to proportions, (b) sum proportions, and (c) divide by number of items. Although all items included in the global sexual functioning score are present in the original 28-item version, items have been renumbered in the current 46-item version.

Reliability

The global sexual functioning scores have excellent temporal stability. For example, in a sample of 27 older married women (mean age = 59), 2-week test-retest reliability was .92 (Creti et al., 1988). Temporal stability of the male global sexual functioning score, based on a sample of older married men described by Libman et al. (1989) (n = 45, mean age = 65), was .98.

Evaluation of internal consistency also shows acceptable psychometric properties for the global sexual functioning scores. For example, Cronbach's alpha for the male global sexual functioning was .65. Good internal consistency is

^{*}Responses equaling 6 are considered missing.

reported for the female global sexual functioning score; item-total correlation coefficients presented by Creti et al. (1988) show *r* values ranging from .18 to .85, with the majority of values between .50 and .70.

Validity

Male global sexual functioning. Data indicate that, first, the global sexual functioning score can differentiate sexually well-functioning from poorly functioning men, and it is responsive to changes with therapy: Creti et al. (1987) reported that men with diagnosed sexual dysfunction had significantly (p < .05) worse scores (M = .66, SD = .14) than well-functioning men (M = .37, SD = .08), and Kalogeropoulos (1991) found scores to significantly improve in a sample of 53 males who had undergone vasoactive intracavernous pharmacotherapy for erectile dysfunction. Second, the global sexual functioning score is significantly related to other sexual functioning measures: Creti et al. (1987) found that men with higher sexual self-efficacy scored significantly better (M = .48, SD = .07) than men with lower sexual self-efficacy (M = .59, SD = .10), and global sexual functioning scores were found to be logically and significantly related to scores on measures of sexual satisfaction, sexual repertoire, sexual self-efficacy and sexual drive (Creti et al., 1987; Creti & Libman, 1989). Third, the global sexual functioning score is sensitive to age differences in sexual functioning: Libman et al. (1989) and Libman et al. (1991) showed that older married men (age 65+) had significantly worse scores (M = .50) than middle-aged married men (age = 50-64, M = .46), and Creti et al. (1987) and Creti and Libman (1989) found the score to be logically and significantly correlated with age. In addition, Libman et al. (1989) and Libman et al. (1991) showed that there is a small but significant deterioration in middle-aged and older men who have undergone surgery for benign prostatic enlargement (change from presurgery M = .43, SD = .08, to postsurgery M = .48, SD = .11).

Female global sexual functioning. Data reported by Creti et al. (1988) indicate that (a) women with diagnosed sexual dysfunction had worse scores (M=.68, SD=.17) than women who were functioning well (M=.49, SD=.14); (b) female global sexual functioning scores were logically and significantly correlated with sexual harmony, sexual satisfaction, diversity of sexual repertoire, and sexual drive; and (c) younger women (age 21-46) had better scores (M=.46, SD=.03) than older women (age greater than 64) (M=.62, SD=.16). Global sexual functioning scores were also found to be related to the females' sexual efficacy expectations for her male partner (Creti & Libman, 1989).

Other Information

The 28-item version of the SHF is also available in French (Formulaire d'Histoire Sexuelle).

References

Creti, L., Fichten, C. S., Libman, E., Amsel, R., & Brender, W. (1988, June). Female sexual functioning: A global score for Nowinski and LoPiccolo's Sexual History Form. Paper presented at the annual

- convention of the Canadian Psychological Association, Montreal, Quebec. (Abstracted in Canadian Psychology, 29[2a], Abstract 164)
- Creti, L., Fichten, C. S., Libman, E., Kalogeropoulos, D., & Brender, W. (1987, November). A global score for the "Sexual History Form" and its effectiveness. Paper presented at the 21st annual convention of the Association for Advancement of Behavior Therapy, Boston.
- Creti, L., & Libman, E. (1989). Cognitions and sexual expression in the aging. *Journal of Sex & Marital Therapy*, 15, 83-101.
- Fichten, C. S., Libman, E., Takefman, J., & Brender, W. (1988). Self-monitoring and self-focus in erectile dysfunction. *Journal of Sex & Marital Therapy*, 14, 120-128.
- Kalogeropoulos, D. (1991). Vasoactive intracavernous pharmacotherapy for erectile dysfunction: Its effects on sexual, interpersonal, and psychological functioning. Unpublished doctoral dissertation, Concordia University, Montreal, Quebec.
- Libman, E., Fichten, C. S., Creti, L., Amsel, R., & Brender, W. (1986, June). Aspects of sexual functioning in an aging population. Paper presented at the Canadian Psychological Association, Toronto. (Abstracted in Canadian Psychology, 27, Abstract 354)
- Libman, E., Fichten, C. S., Creti, L., Weinstein, N., Amsel, R., & Brender, W. (1989). Transurethral prostatectomy: Differential effects of age category and presurgery sexual functioning on postprostatectomy sexual adjustment. *Journal of Behavioral Medicine*, 12, 469-485.
- Libman, E., Fichten, C. S., Rothenberg, P., Creti, L., Weinstein, N., Amsel, R., Liederman, G., & Brender, W. (1991). Prostatectomy and inguinal hernia repair: A comparison of the sexual consequences. Journal of Sex & Marital Therapy, 17, 27-34.
- Libman, E., Rothenberg, I., Fichten, C. S., & Amsel, R. (1985). The SSES-E: A measure of sexual self-efficacy in crectile functioning. Journal of Sex & Marital Therapy, 11, 233-244.
- LoPiccolo, J. (1981). Norms for Sex History Form (male and female). Unpublished manuscript, Texas A&M University, College Station.
- Nowinski, J. K., & LoPiccolo, J. (1979). Assessing sexual behaviors in couples. Journal of Sex & Marital Therapy, 5, 225-243.
- Schover, L. R., Fife, M., & Gershenson, D. M. (1989). Sexual dysfunction and treatment for early stage cervical cancer. Cancer, 63, 204-212.
- Schover, L. R., Friedman, J. M., Weiler, J., Heiman, J. R., & Lo-Piccolo, J. (1982). Multiaxial problem-oriented system for sexual dysfunctions: An alternative to DSM-III. Archives of General Psychiatry, 39, 614-619.
- Schover, L. R., & Jensen, S. B. (1988). Sexuality and chronic illness: A comprehensive approach. New York: Guilford.
- Schover, L. R., & LoPiccolo, J. (1982). Treatment effectiveness for dysfunctions of sexual desire. Journal of Sex & Marital Therapy, 8, 179-197.
- Schover, L. R., Novick, A. C., Steinmuller, D. R., & Goormastic, M. (1990). Sexuality, fertility, and renal transplantation: A study of survivors. *Journal of Sex & Marital Therapy*, 16, 3-14.
- Schover, L. R., Yetman, R. J., Tuason L. J., Meisler, E., Esselstyn, C. B., Hermann, R. E., Grundfest-Broniatowski, S., & Dowden, R. V. (1995). Comparison of partial mastectomy with breast reconstruction on psychosocial adjustment, body image, and sexuality. Cancer, 75, 54-64.
- Trudel, G., Ravart, G., & Matte, B. (1993). The use of the multiaxial diagnostic system for sexual dysfunctions in the assessment of hypoactive sexual desire. *Journal of Sex & Marital Therapy*, 19, 123-130.
- Weinstein, N., Pencer, I., Libman, E., Fichten, C. S., Creti, L., Rothenberg, P., Liederman, G., Amsel, R., & Brender, W. (1989, October). Does aging affect sexual expression? Paper presented at the annual convention of the Société Québécoise pour la Recherche en Psychologie, Montreal, Quebec. (Abstracted in XIIième congrès annuel: Programme et résumés des communication, 177. Montreal: Société Québécoise pour la Recherche en Psychologie)

Exhibit

Sexual History Form

Please circle the most appropriate response to each question.

quentl	iently (do you	and yo	ur mate l	have sexual	intercour	se or activity?	
than	han or	nce a d	ay			6)	Once every 2 weeks	
a day	day						Once a month	
4 time	times a	a week				8)	Less than once a month	
	a week					200	Not at all	
a wee	week							
			you like	e to have	sexual inter	course o	r activity?	
		nce a d					Once every 2 weeks	
: a day			•				Once a month	
		a week				0.000	Less than once a month	
e a we	a week						Not at all	
	a week					(0.5)		
			xual in	tercourse	or activity?			
ays do							My mate usually does	
aĺly d							My mate always does	
		I I initia	ate abou	ut equally	v often	- 6		
					exual interc	ourse or	activity?	
	f, alway						My mate, usually	
	f, usual						My mate always	
			ally ofte	:n		-7		
					s, how do yo	ou usuall	v respond?	
			h pleasu		., , .		Often refuse	
	reluct		Process				Usually refuse	
			erience	sexual de	esire (this ma		e wanting to have sex, planning	ng to have sex, feeling
			of sex, e			7		
		nce a d		,		6)	Once every 2 weeks	
a day			-1				Once a month	
		a week					Less than once a month	
	a week						Not at all	
	a week					-1		
			turbare	(bring ve	ourself to or	pasm in r	private)?	
		nce a d		(01.11.8)	31110011 10 01		Once every 2 weeks	
e a day		nee n a	,				Once a month	
		a week					Less than once a month	
	a week		K.				Not at all	
	a week					~/	110t at an	
			nd vour	r mate us	ually engage	in sexus	l foreplay (kissing, petting, et	c) before having
rse?		, , 0	nei your	indice to	uanij engage	in sexui	in to to piny (kinsing, petting, ex	,
	nan 1 n	ninute				5)	11 to 15 minutes	
	minute						16 to 30 minutes	
	minute						30 minutes to one hour	
	0 minu					* 3	of mining to one non-	
			nirse nsi	ually last	from entry	of the pe	enis to the male's orgasm/clim	ax)
	nan 1 n			thirly mait,	, irom emij		7 to 10 minutes	
	minute					100	11 to 15 minutes	
	minute						15 to 20 minutes	
	minute						More than 30 minutes	
			ch orga	iem while	he is trying		the vagina with his penis?	
er er		ver rea	en orga	WHIT WILLIE	. He is trying		Sometimes (50% of the time)
		than 10	10/0 of -1	ne time\				6
								the time)
reel II	or illal	prema	mine eja	actinition	trapid cillis			isinp:
ely (les om (le	v (less t m (less	than 2	25% of 1	he time) the time) aculation		5) 6) (x) is a p	Usually (75% of the time) Nearly always (over 90% of toblem in your sexual relation	t

12.	How satisfied are you with the variety of sexual activities of kissing and caressing with a partner, different position	ns fo	r interco	urse,	etc.)			
	1) Extremely satisfied		Slightly t					
	2) Moderately satisfied				msatisfied			
1.2	3) Slightly satisfied	6)	Extreme	ly un	satisfied			
15.	Would you like your lovemaking to include <i>more</i> : Breast caressing	11	Van	21	No			
	Hand caressing of your genital area	100	Yes Yes		No No			
	Oral caressing (kissing) of your genital area		Yes	333.553	No			
	Different positions for intercourse		Yes	300	No			
14.	If you would like a certain kind of sexual caress or activ							
	1) I wait to see if my partner will do what I like withou				, , , , , , , , , , , , , , , , , , , ,			
	2) I show my partner what I would like by moving their	g my own position						
	3) I tell my partner exactly what I would like							
15.	How have you typically learned about your partner's se	xual	likes and	disl	ikes?			
	1) From my partner telling me exactly what they want			200-00-00				
	2) From my partner moving my hand or changing their position to signal what they would like me to do							
	3) From watching my partner's reactions during sex							
16	 From intuition When you have sex with your mate do you feel sexually 		wand to a	600	ling "turned on " placeure avaitament)			
10.	1) Nearly always (over 90% of the time)				ut 25% of the time)			
	2) Usually (about 75% of the time)		Never	(ano	at 23 % of the time,			
	3) Sometimes (about 50% of the time)	5)	110101					
17.	When you have sex with your mate, do you have negati	ve e	motional	reac	tions (e.g., fear, disgust, shame, or guilt)?			
SS 7/1	1) Never				50% of the time)			
	2) Rarely (less than 10% of the time)	1000			of the time)			
	3) Seldom (less than 25% of the time)	6)	Nearly a	lway	rs (over 90% of the time)			
18.	Does the male have any trouble getting an erection before							
	1) Never				50% of the time)			
	2) Rarely (less than 10% of the time)				6 of the time)			
1.0	3) Seldom (less than 25% of the time				vs (over 90% of the time)			
19.	Does the male have any trouble keeping an erection one							
	1) Never 2) Parely (less than 10% of the time)				50% of the time) 6 of the time)			
	2) Rarely (less than 10% of the time)3) Seldom (less than 25% of the time)				ys (over 90% of the time)			
20.	If the male loses an erection, when does that usually hap			iivvei	ys (over 20% of the time)			
	Before penetrating to start intercourse			netra	ntion, during the thrusting of intercourse			
	2) While trying to penetrate				ole, losing erections is not a problem			
21.	What is the male's typical degree of erection during sex							
	1) 0% to 20% of a full erection	4)	60% to	80%	of a full erection			
	2) 20% to 40% of a full erection	5)	80% to	1000	% of a full erection			
	3) 40% to 60% of a full erection							
22.	Does the male ejaculate (climax) without having a full,				500/ (1)			
	1) Never				50% of the time)			
	2) Rarely (less than 10% of the time) 3) Seldom (less than 25% of the time)				6 of the time)			
23	If you try, is it possible to reach orgasm (sensation of cli				ys (over 90% of the time)			
23.	1) Nearly always (over 90% of the time)				ut 25% of the time)			
	2) Usually (about 75% of the time)		Never	(abo	at 25 % of the time,			
	3) Sometimes (about 50% of the time)		Have ne	ver	tried to			
24.	If you try, is it possible for you to reach orgasm (sensati							
	mate?							
	1) Nearly always (over 90% of the time)	4)	Seldom	(abo	ut 25% of the time)			
	2) Usually (about 75% of the time)		Never					
	3) Sometimes (about 50% of the time)		Have no					
25.	If you try, is it possible for you to reach orgasm (sensati							
	1) Nearly always (over 90% of the time)			(abo	out 25% of the time)			
	2) Usually (about 75% of the time)3) Sometimes (about 50% of the time)	250.0	Never	war	tried to			
	of conferences (about 50% of the time)	0)	Have no	VCI	tricu to			

26.	Can you reach orgasm (sensation of climax) through st means (i.e., running water, rubbing with some object, e		ation of your genitals by an electric vibrator or any other
	1) Nearly always (over 90% of the time)		Seldom (about 25% of the time)
	2) Usually (about 75% of the time)		Never
	3) Sometimes (about 50% of the time)		Have never tried to
27.			irse if, at the same time, your genitals are being caressed
	(by yourself or your mate with a vibrator, etc.)?		
	1) Nearly always (over 90% of the time)	4)	Seldom (about 25% of the time)
	2) Usually (about 75% of the time)		Never
20	3) Sometimes (about 50% of the time)		Have never tried to
28.	Have you noticed a change in the intensity and pleasur		
			Somewhat less intense and pleasurable than in the past
	 Somewhat more intense and pleasurable than in the past 	3)	Much less intense and pleasurable than in the past
	3) The same as in the past		
29.	Is the female's vagina so "dry" or "tight" that intercoun	se ca	nnot occur?
	1) Never		Sometimes (50% of the time)
	2) Rarely (less than 10% of the time)		Usually (75% of the time)
	3) Seldom (less than 25% of the time		Nearly always (over 90% of the time)
30.	Do you feel pain in your genitals (sexual parts) during		
	1) Never		Sometimes (50% of the time)
	2) Rarely (less than 10% of the time)	5)	Usually (75% of the time)
	3) Seldom (less than 25% of the time		Nearly always (over 90% of the time)
31.	How often does pain (genital or nongenital) interfere v		
	1) Never		Sometimes (50% of the time)
	2) Rarely (less than 10% of the time)		Usually (75% of the time)
20	3) Seldom (less than 25% of the time		Nearly always (over 90% of the time)
32.	Have you noticed a change in the sensitivity to touch of		
	1) Much more sensitive than in the past		Somewhat less sensitive than in the past
	2) Somewhat more sensitive than in the past	3)	Much less sensitive than in the past
2.2	3) About as sensitive as in the past	حاجات	with your mare)
.).).	Overall, how satisfactory to you is your sexual relation 1) Extremely unsatisfactory		Slightly satisfactory
	2) Moderately unsatisfactory		Moderately satisfactory
	3) Slightly unsatisfactory		Extremely satisfactory
34.	Overall, how satisfactory do you think your sexual rela		
	Extremely unsatisfactory		Slightly satisfactory
	2) Moderately unsatisfactory		Moderately satisfactory
	3) Slightly unsatisfactory		Extremely satisfactory
35.	Do you feel that your partner plays a part in causing a	prob	lem in your sex life?
	1) Yes	2)	No
36.	If your lovemaking does not go well, how does your p		
	Accepting and understanding		Anxious and blaming self
2.20	2) Frustrated or annoyed		Neutral or uncaring
37.	(Women only, men go on to Question 38) When you h		
	do you notice some of these things happening: your b	reath	ing and pulse speed up, wetness in your vagina,
	pleasurable sensations in your breasts and genitals?	4)	Saldam Jahan 2506 of the time
	1) Nearly always (over 90% of the time)	0.000	Seldom (about 25% of the time) Never
	Usually (about 75% of the time)Sometimes (about 50% of the time)		Have never tried to
3.8			erection (including times when you wake up needing to
50.	urinate)?	111111	erection (including times when you wake up needing to
	1) Daily	5)	Once a month
	2) 3-4 times a week		Less than once a month
	3) 1-2 times a week	250.00	Never
	4) Once every 2 weeks	1775 (%	9/E-2/19(1) 9/E-1
39.	(Men only) How often do you wake from sleep with a	part	ial (semisoft) erection?
	1) Daily	5)	Once a month
	2) 3-4 times a week	6)	Less than once a month
	3) 1-2 times a week	7)	Never
	4) Once every 2 weeks		

40.	(Men only) How often are you able to get and keep a fir	m e	rection in your own masturbation (self-touch in private)?					
	1) Nearly always, over 90% of the time	5)	Rarely, less than 10% of the time					
	2) Usually, 75% of the time	6)	Never					
	3) Sometimes, 50% of the time	7)	Have not tried masturbation in the past 6 months					
	4) Seldom, less than 25% of the time							
41.	(Men only) What is your typical degree of erection during masturbation (self-touch in private)?							
	1) 0% to 20% of a full erection	4)	60% to 80% of a full erection					
	2) 20% to 40% of a full erection	5)	80% to 100% of a full erection					
	3) 40% to 60% of a full erection							
42.	(Men only) Do you feel your erect penis has an abnormal curve to it, or have you noticed a lump or "knot" on your							
	penis?							
	1) Yes	2)	No					
43.								
	1) Yes	2)	No					
44.	(Men only) How does the amount of ejaculate (liquid or semen) now compare to the amount you ejaculated in the							
	past?							
	1) Much greater than in the past	4)	Somewhat less than in the past					
	2) Somewhat greater than in the past	5)	Much less than in the past					
	3) About the same as in the past	6)	I do not know					
45.	(Men only) Do you ever have the sensation of orgasm (climax) without any ejaculation of fluid?							
	1) Never	4)	Sometimes, about 50% of the time					
	2) Rarely, less than 10% of the time	5)	Usually, about 75% of the time					
	3) Seldom, less than 25% of the time	6)	Nearly always, over 90% of the time					
46.	(Men only) Do you ever have pain and/or burning durin	g or	r after ejaculation?					
	1) Never	5)	Usually, about 75% of the time					
	2) Rarely, less than 10% of the time	6)	Nearly always, over 90% of the time					
	3) Seldom, less than 25% of the time		I do not ejaculate					
	4) Sometimes, about 50% of the time							

Note. Items 1, 2, 6, 7, 10, 16, 18, 19, 22, 23, 24, 25, 26, 27, 29, and 37 are used to compute the global sexual functioning score.

The Derogatis Interview for Sexual Functioning

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Description

The Derogatis Interview for Sexual Functioning (DISF) is a brief semistructured interview designed to provide an estimate of the quality of an individual's current sexual

functioning in quantitative terms. The DISF represents quality of current sexual functioning in a multidomain format, which to some degree parallels the phases of the sexual response cycle (Masters & Johnson, 1966). The 26 interview items of the DISF are arranged into five domains of sexual functioning: I. Sexual Cognition/Fantasy, II. Sexual Arousal, III. Sexual Behavior/Experience, IV. Orgasm, and V. Sexual Drive/Relationship. In addition, the DISF total score is computed, summarizing quality of sexual functioning

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