

SEXX IN THE LAND OF KAMA SUTRA

BY VIJAY NAGASWAMI

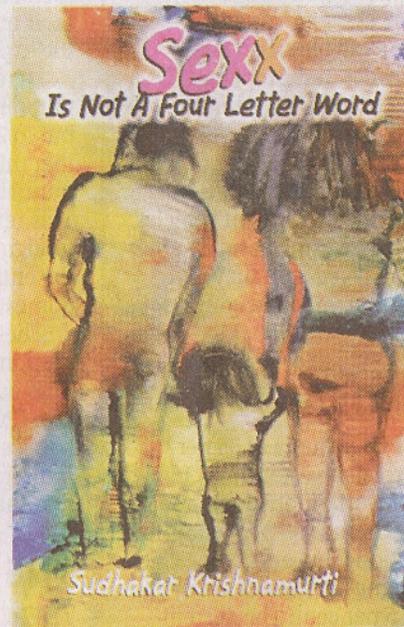
VATSAYANA'S monumental effort notwithstanding, sex in the land of the Kama Sutra is still seen as an activity that is too embarrassing, and even 'dirty', to talk or write about. As a result, most adults' knowledge of sex is gleaned through hushed conversations, bawdy literature and the ubiquitous porn sites that the Internet has very kindly laid bare for its netizens. It's not surprising therefore that most young people approach their sexuality with a combination of suspicion, misconception and great amounts of trepidation. As any practicing sex therapist will tell you, a fair number of sexual problems owe their origins to myths, misconceptions and sexual anxieties that cloud the minds of most Indian adults. And when the *suhaag raat* becomes just another *raat* with little or no *suhaag*, as *suhaag raats* invariably turn out to be, the average couple experience considerable amounts of misgivings, apprehensions and self-doubt and either end up visiting a series of sex-quacks or prefer to let their marriages stay unconsummated than attempting to engage in the anxiety-provoking act.

Sex education, which is usually a

series of dry lectures on the mechanics of reproduction, rarely helps. Quality popular literature written for the Indian market is a crying necessity. And Dr Sudhakar Krishnamurti, a well-known andrologist from Hyderabad, has attempted to fill this very lacuna even if his book, *Sexx is Not a Four-Letter Word*, a collection of updated and modified versions of some of his earlier pieces that appeared in newspapers and periodicals, is a bit of mixed bag.

The author's credentials, as listed in the book, are impeccable. He is one of the few urologists in the country who has specialised in disorders of the male reproductive system (andrology); he has decades of exclusive experience in the subject; he even has an operation named after him (the 'Krishnamurti operation' for a disease called Peyronie's Disease); and he has received prestigious awards in the field. It is not always easy to address the issue of sex and sexuality and most books on the subject end up being replete with diagrams, drawings and even gory pictures of the male reproductive system. Fortunately, Dr Krishnamurti has completely eschewed this approach and has chosen to address the issue with a lighter touch.

Also, he has been extremely com-



SEXX IS NOT A FOUR-LETTER WORD

by Sudhakar Krishnamurti
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prehensive in choice of subjects and the book covers a wide assortment of sexual issues including premature ejaculation (a national malady), erectile dysfunction (impotence), infertility, transsexuality, andropause, sex addiction, sexual perversions (paraphilias), pornography and the myths surrounding masturbation, penis size and vasectomies. In short, everything you always wanted to know about sexual dysfunctions but were either afraid to or did not know whom to ask! In so doing, he has done a valuable service to the millions of Indians who are besieged with sexual doubts and anxieties and have chosen to lead a sub-optimal life when, with a little bit of professional support, they could be as sexually gratified as the next person. He has also given the professional discipline of andrology a huge shot in the arm and if, in the foreseeable future,

men seek consultations with andrologists with as much insouciance as women visit gynaecologists, he could certainly lay claim to being one of the architects of this transformation.

However, in the process of achieving all of this, his book does strike a few discordant notes. Adopting an irreverent style of humour, he sometimes ends up sounding judgmental rather than empathic of his patients and their spouses as when he refers to them as battle-axes, harridans and termagants. At places the humour seems forced and his choice of puns (for example, referring to a patient as Hitchcock) does not always work. In the interest of giving his readers access to a variety of sources of credible information on the subject, it might have been more appropriate if at least some of the web links provided at the end of each chapter were linked to websites other than his own. And what I found particularly disquieting was his adoption of the typically cavalier approach most medical professionals use: If something's wrong, give him a pill; and if this doesn't work, operate. While this approach works very well in the medical and surgical management of clinical disorders, in the area of sexual dysfunctions, probably more than in any other area, a more broad-based empathic approach is absolutely vital. For sex has a lot to do with the mind and is not merely a function of one's reproductive apparatus. Frequently sexual problems occur in the context of marital discord and the former need not always cause the latter. More often than not, a fair number of sexual dysfunctions are caused by misconceptions, anxieties, fears and half-knowledge and approaching such sufferers with a purely clinical orientation may be akin to taking a mallet to a mosquito. However, his point that most, if not all, sexual dysfunctions are eminently curable is one that desperately needed to be made and that he has done so with authority has earned him my accolades. ■