cognitive restructuring, working upon denial, empathy training, social skills training and relapse prevention. A 25 years follow-up study about the efficacy of cognitive-behavioural therapy demonstrated the validity of these protocols.

Unfortunately, up to now in Italy the vast majority of convicted sexual abusers doesn’t receive any specific treatment. In Prato prison, in Tuscany, we recently activated a pilot program of group cognitive-behavioural therapy.

**Materials and methods:** A first sample of 6 subjects (43-61 years old) during 6 months attended 120 therapy hours, in which the above described protocol was performed. Some questionnaires (MMPI-2 and others) were administered as pre- and post-test.

**Results:** Post-test preliminary results showed a marked reduction of liars scales and all group therapy participants cooperated actively with the therapists, each one producing a relapse prevention manual, that they’ll be able to use after the release.

**Conclusions:** The outcome of the protocol was encouraging, even if we cannot evaluate the effects on the recidivism rate, since the program was implemented only a year ago. Our group intends to perform in the future a follow-up study on recidivism and program efficacy.

**Explorative survey on the level of online sexual activities and sexual paraphilias**

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**Objectives:** The objective of this survey is to analyze the relationship between the level of online sexual activities (OSA) and the presence of sexual paraphilias in a sample of 300 Internet users (230 males, 63 females and 7 transsexuals; age 18-58 years).

**Materials and methods:** Participants recruitment and data gathering were managed online through a self-report electronic questionnaire that included: The Internet Sex Screening Test, aimed to assess the level of OSA and to divide the users in recreational users and at-risk users; an ad hoc questionnaire (QTSPoo) elaborated to survey the presence of online and offline sexual paraphilias.

**Results:** Our data showed a positive and significant relationship between the level of OSA and the time spent online for sexual purposes and also between the level of OSA and the level of sexual paraphilias, specifically: group sex, exhibitionism, fetichism, sadism, masochism, voyeurism, reversed voyeurism, urophilia, narratophilia and picacism.

We assessed differences between at-risk group (n=126) and recreational group (n=153) on the basis of some sociodemographic variables and also in relation to frequency and time online for sexual purposes. Specifically, the at-risk users group reports a level of sexual satisfaction higher than the recreational group. This difference is statistically significant (t(277) = -10.91, p<.001).

**Conclusions:** The differences assessed between the groups seems to support the theoretical hypothesis that considers the use of Internet to obtain sexual satisfaction a potential factor involved in the complex expression of paraphillic sexual behaviour.

**ED as a couple dysfunction**

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In recent years, clinicians have shifted the traditional interest in the individual’s sexual performance to focus on the level of sexual satisfaction within the couple. The latter in fact represents the “place” of junction for the difficulties occurring both in the individual and in the relationship. Therefore, it is necessary to have a holistic approach to any changes occurring within the couple, be it physiological, psychological or relationship, considering the strong inter-relatedness between the various components.

The definition of a therapeutic plan must inevitably also take into account all of those social and cultural aspects that influence the set of values or beliefs of each individual partner in relation to one’s own condition and to the possibility of change.

The beliefs of the patients are strongly connected to their expectations, and can have important effects on the success of treatment. It is crucial to investigate the different ways in which these expectations can influence the process of intervention. For some couples, partly influenced by widespread stereotypes, sexuality is strictly the expression of an instinctual dimension in human beings and as such, it has rigid and repetitive characteristics rarely predictable, and hardly influenced by one’s will.

This may indicate treatment acceptance or rejection, realistic or unrealistic expectations. The treatment will never be able to modify what nature has determined.

On the other hand, if you believe that sexuality is above all a psychosocial phenomenon the couple will more easily adapt to the integrative approach to cure sexual dysfunction.

**Sexual counselling in elderly couple**

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The authors will present counselling experiences with elderly couples according to the integrative approach carried out by the “Clinical Institute of Sexology” in Rome. The aim of this presentation is to underline the importance of using sexual counselling as an approach for a psychosoexological assessment targeting male and female ageing people.

The data that will be introduced concerns elderly couples who have requested sexual counselling from the Institute.

The analysis underlines the effectiveness of an approach which combines the classical principles of counselling with the knowledge and the peculiarities of sexological science. In recent years the importance of sexuality has been recognized to be very important non only in the reproductive phase of life but also in the elderly.

Sexual counselling serves not only to cure dysfunctions brought on by age, but to help elderly persons continue a healthy sexually active life.