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CORRIGENDUM



Corrigendum to: Who feels affected by “out of control” sexual behavior? Prevalence and correlates of indicators for ICD-11 Compulsive Sexual Behavior Disorder in the German Health and Sexuality Survey (GeSiD)

PEER BRIKEN^{1*}, CHRISTIAN WIESSNER^{1,2},
ALEKSANDER ŠTULHOFER³, VERENA KLEIN¹,
JOHANNES FUß^{1,4}, GEOFFREY M. REED^{5,6} and
ARNE DEKKER¹

¹ Institute for Sex Research, Sexual Medicine, and Forensic Psychiatry, University Medical-Center Hamburg-Eppendorf, Germany

² Institute of Medical Biometry and Epidemiology, University Medical Center Hamburg-Eppendorf, Germany

³ Department of Sociology, Faculty of Humanities and Social Sciences, University of Zagreb, Croatia

⁴ Institute of Forensic Psychiatry and Sex Research, Center for Translational Neuro- and Behavioral Sciences, University of Duisburg-Essen, Essen, Germany

⁵ Department of Psychiatry, Columbia University Vagelos College of Physicians and Surgeons, New York, NY, USA

⁶ Department of Mental Health and Substance Abuse, World Health Organization, Geneva, Switzerland

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The above paper should be modified as follows:

1. An incorrect description of the item “experience of child or adolescent sexual abuse” in the *Measures/Personal (sexual) history* subsection of the Methods section (see p. 903):

“An experience of child sexual abuse was measured by asking “Has a person ever tried to touch you against your will with sexual intent or tried to make you touch him/her?”, with the possible answers “no” or “yes, it has happened to me or someone attempted this with me”. Participants were then asked how old they had been, when this had occurred for the first time. If they had been below the age of 18 and the abusing person was at least 5 years older they were defined as having experienced any form of child or adolescent sexual abuse.”

The 5-year interval (*and the abusing person was at least 5 years older*) was included by mistake, as the qualification makes no sense in our sexual compulsiveness paper, it should be omitted.

The last sentence should read:

If they had been below the age of 18, they were defined as having experienced any form of child or adolescent sexual abuse.

2. The second error is related to the fact that we reported the prevalence of sexual abuse in “childhood and adolescence up to age 18” (age of majority in Germany) without applying the appropriate age filter. Thus, what is reported in the paper in *Table 2*, and the *Personal (sexual) history* subsection of the *Results* section, is lifetime prevalence instead of the prevalence up to the age of 18. The error is due to an incorrect syntax used.

Table 2 with the corrected **Experienced child or adolescent sexual abuse** row should read:

*Corresponding author.

E-mail: briken@uke.uni-hamburg.de



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Table 2. (corrected) Crude and multivariable analyses of CSBD

	Persons without CSB (unweighted N = 4,276, weighted N = 4,198)	Persons with CSB (unweighted N = 187, weighted N = 173)			Persons with CSBD (unweighted N = 170, weighted N = 179)		
	Percent of population	Percent of population	Adjusted OR ¹	95% CI	Percent of population	Adjusted OR ¹	95% CI
Personal (sexual) history							
Strictly religious upbringing	22.6	20.3	1.02	0.63–1.66	32.0	1.70	1.14–2.55
Experienced child or adolescent sexual abuse	18.1	21.2	1.68	1.07–2.62	22.9	1.83	1.07–3.12
First lifetime experience with pornography prior to age 15	26.4	43.2	1.23	0.85–1.78	39.2	1.43	0.94–2.20
Knowledge about sexuality influenced by pornography	59.5	77.6	2.06	1.24–3.41	74.6	2.06	1.27–3.33
Number of sex partners ≥10	27.8	35.0	1.33	0.92–1.92	27.5	1.02	0.65–1.60
lifetime experience with sex worker	13.0	20.9	1.37	0.83–2.28	28.0	2.50	1.59–3.92
Sexual behavior							
Frequency of masturbation (last 12 months)							
Never	31.7	18.8	1.00		13.6	1.00	
Sometimes	54.4	49.2	1.27	0.73–2.21	52.4	2.67	1.35–5.30
Frequently	13.9	32.0	2.48	1.33–4.61	34.0	6.87	3.24–14.56
Frequency of pornography consumption (last 12 months)							
Never	39.6	19.7	1.00		23.6	1.00	
Sometimes	49.3	59.4	1.66	0.95–2.89	49.8	1.76	1.00–3.11
Frequently	11.2	20.9	2.12	1.02–4.39	26.5	4.35	2.15–8.78
Number of orgasms (last 4 weeks)							
0 to 4 orgasms	56.8	30.4	1.00		44.9	1.00	
5 to 14 orgasms	29.5	37.9	1.85	1.16–2.93	32.2	1.28	0.80–2.06
15 or more orgasms	13.7	31.7	2.89	1.72–4.87	22.9	1.77	0.98–3.20
Condom use (last 12 months; never or sometimes)	75.2	69.1	1.00	0.64–1.56	68.7	0.89	0.56–1.42
Attitudes towards sexuality and perceived impact of Pornography							
Attitudes towards sexuality in general ²			0.84	0.74–0.97		0.95	0.83–1.10
1-3 (<i>liberal</i>)	52.2	71.5			56.7		
4	23.0	12.6			16.6		
5-7 (<i>conservative</i>)	24.8	15.9			26.7		
Attitudes towards different sex practices ^{2, 3}			1.02	0.99–1.06		0.98	0.95–1.00
1st Tertile (<i>not acceptable</i>)	36.1	31.9			42.9		
2nd Tertile	34.8	31.4			36.6		
3rd Tertile (<i>acceptable</i>)	29.1	36.7			20.5		
Negative impact on sex life due to pornography	11.1	20.9	1.45	0.88–2.39	32.6	3.36	2.15–5.23
Negative impact on everyday life due to pornography	34.3	58.4	2.40	1.04–5.53	72.3	3.90	1.95–7.78
Health and life satisfaction							
Lifetime STI ⁴	13.0	16.8	1.83	1.03–3.28	16.3	1.70	0.93–3.11
Uncontrolled alcohol consumption	18.2	26.2	1.37	0.91–2.06	23.8	1.30	0.89–1.90
Treatment for depression or other mental illness (last 12 months)	10.0	7.0	0.79	0.42–1.47	23.1	3.29	2.15–5.04
Life satisfaction ²			0.90	0.75–1.07		0.71	0.62–0.82

(continued)



Table 2. (corrected) Continued

	Persons without CSB (unweighted $N = 4,276$, weighted $N = 4,198$)	Persons with CSB (unweighted $N = 187$, weighted $N = 173$)		Persons with CSBD (unweighted $N = 170$, weighted $N = 179$)			
	Percent of population	Percent of population	Adjusted OR ¹	95% CI	Percent of population	Adjusted OR ¹	95% CI
1-3 (<i>not satisfied</i>)	6.3	6.7			15.0		
4	10.1	8.1			16.2		
5-7 (<i>satisfied</i>)	83.7	85.2			68.8		

Notes.¹ Odds ratios adjusted for sex, age, migration background, education, religious upbringing, and attitudes towards different sex practices.

² For these variables percentages are given for categories (ordinal scales), OR are calculated with predictors as metric scales.

³ The following (sex) practices were considered: married person has sex with someone else, men having sex with men, women having sex with women, women having an abortion, person having sex with prostitutes, person having sex with many different partners and person having sex without love.

⁴Sexually Transmitted Infections.

3. The second sentence of the *Personal (sexual) history* subsection of the *Results* section should read:

Members of the CSB and the CSBD groups (CSB: 21.2%; OR 1.68; 95% CI 1.07–2.62; CSBD: 22.9%; OR 1.83; 95% CI 1.07–3.12) were more likely to report a history of child or adolescent sexual abuse than the group not reporting CSB (18.1%).

The new proportion is expectedly lower, but the finding that sexual abuse (up to the age of 18) is higher in the CSB and CSBD groups, compared to the rest of the national sample, remains unchanged. Therefore, nothing needs to be corrected in the Discussion section.

We apologize for the mistake.

The Authors