

MY ADVENTURES ON FEMALE VIAGRA

Addyi is the new wonder pill that aims to boost a woman's sex drive. *Stephanie Theobald* gets hot and bothered as she becomes one of the first journalists to try it

It feels very Drugstore Cowboy going into Walgreens — the American equivalent of Boots — in Los Angeles to collect my prescription.

A man in a white coat looks shifty as he hands me a package. “This is a medication that might...” he lowers his voice, “increase your libido.” I nod nervously and slip the world's first legally sanctioned pill to boost female sex drive into my bag.

Yet the mechanism behind “female Viagra”, as the drug Addyi has been dubbed, is not as straightforward as the original. Unlike Viagra, which works by increasing blood flow to the penis, and which you take when you need it, Addyi (chemical name flibanserin) works like an antidepressant. It messes with the chemistry of your brain, and you have to take it every day. It is believed to increase levels of the hormones dopamine and norepinephrine in the brain (key to sexual desire) and damp down serotonin, which seems to put the brakes on lust.

The doctor who prescribed my Addyi is Julie Holland, a psychopharmacologist and author of the book *Moody Bitches*, about why women are being prescribed too many “happy pills”, as she calls them. She doesn't see Addyi as the miracle aphrodisiac it has been hailed as since its launch in America last October.

“It doesn't work, you can't drink alcohol, you can't be on the pill. Oh and — did I mention? — it doesn't work.”

In trials, what were referred to as “satisfying sexual events” only increased by about one per month for women. Big pharma, Holland says, has been struggling for decades to come up with a female equivalent to Viagra (a drug worth £1.2bn to its maker, Pfizer, in 2015) without too many side effects. “It's a black-box medication,” she says, warning that if I drink any alcohol while on it, I might pass out, which seems a bit of a downer for an aphrodisiac wonder drug. Holland, a known advocate of the healing properties of marijuana, says I would have a better time stirring cannabis butter into coconut oil and applying it topically to my vulva. She adds that a Californian company has launched a commercial version of this called Foria.

I make a note of the coconut-oil option, before

tracking down Dr Leah Millheiser, the director of the Female Sexual Medicine Program at Stanford University School of Medicine and an advocate of Addyi. She tells me she has been “quite impressed” by the effect it has had on her patients so far. “I've not had one patient say that it's not worth giving up alcohol,” she says, albeit she has had only 22 try it.

The drug was approved by the American Food and Drug Administration last August, but unlike the launch of Viagra, Addyi will not be advertised on TV until next year. Sprout Pharmaceuticals, the manufacturer, said it wanted to educate doctors first.

Millheiser says the extra “one per month” sexual event published in the media is misleading. “The women who respond to Addyi will have four to eight extra sexually satisfying events per month.” She claims it is fine to be on the pill while taking Addyi, but stresses that the drug will only work if women are suffering from HSDD or hypoactive sexual desire disorder, a condition that is being bandied around the US right now like bipolar was in the mid-1990s. It means you want to have sex, but you feel as if your mojo has vanished. “It goes beyond just needing to go on holiday,” Millheiser says.

She claims that approximately 12% of women in America suffer from HSDD and headed a key research paper in 2009 to prove it was a real medical condition. When two groups of women (one with normal libidos and one with low libidos) were shown erotic videos, both groups responded physically, but only the normal-libido group were aware that they were aroused. An area of the brain called the entorhinal cortex lit up for this group, but remained unlit for the low-libido women. The study was used by Sprout to help usher through the approval of the drug.

In some ways, I'm the ideal person to try Addyi. I'm not on the pill, I can take or leave a drink and, at 49, am premenopausal, another Addyi stipulation. But in some

ways I'm not ideal. I'm not aware of having HSDD or even a low libido. In fact, for the past two years, I've been writing a memoir called *Sex Drive*, on how to relocate your lost libido. Taking a glorified antidepressant seems a cop-out.

Still, that night I open the bijou box of peach-coloured pills and pop one. I wake up four hours later boiling hot and wired. This goes on for a week. By the end of week two, I'm making use of the time to enjoy some strangely intense solo sex, although I have short waves of nausea and constantly sweaty palms. This is particularly annoying when I'm trying to unlock my fingerprint-activated iPhone.

Socially, Addyi is working brilliantly. When I get asked at a dinner party why I'm not drinking, I decide to tell the truth. The French guy with jet lag suddenly wakes up. “How are you going to test it out?” he asks, flirtatiously. He's sitting next to his girlfriend, but it is a great ego boost. I return home wondering if I should go on Tinder to try out some actual physical action, but then reason that Addyi, while possibly making me horny, isn't going to guard me against bad sex.

And then, at the beginning of week three, something happens. I take a bus to a friend's house in LA to watch the Oscars ceremony. The belly of the Latino woman sitting opposite me wobbles slightly as the bus revs up, and I feel a stirring in my clitoris. At the Oscars party, I find myself on a couch next to Guinevere Turner, one of the screenwriters of *American Psycho*, and suddenly I'm aware of her scent: pepper and lemon and something like roses. My arm is pasted against hers as Leo DiCaprio comes on to make his winner's speech, and I feel as though I can sense all the pores of her skin through my jacket sleeve and her blouse. For a split second in my mind, I spend 30 minutes having sex with her.

She keeps asking me why I'm not drinking my champagne. So I do, and it turns out that booze is the bomb. The podgy chipmunk DiCaprio suddenly seems

smouldering and sexy. I feel kind of... spongy, like when you take ecstasy. I have more of a dirty mind than when I have taken ecstasy in the past, although this could be because I'm researching this story, so I'm thinking about sex more than usual.

I get back to my apartment and, after only two glasses of champagne, I'm lying on the bed feeling utterly blissed out, beyond even thoughts of masturbation. And then I get paranoid and think: I'm zoned out in Hollywood on prescription drugs and alcohol — maybe I'm going to do a Heath Ledger. I can't remember if I've already taken my nightly pill. Should I take another one? I pass out and have a dream involving spanking in a commune in a cave.

By the end of week four, I seem to have this constant warm, melting feeling between my thighs. But the side effects aren't worth it. I'm fed up with the sweaty palms, the hot body, the rush that I feel in my stomach at unexpected moments. I sense that you could have some fun on this drug if you wanted to push the alcohol thing, but I decide that it's too risky. If I want the sensuality/spongy feeling that badly, I could always take E of a weekend. Maybe it's time to test out the weed coconut oil.

Barry Komisaruk, a neuroscientist at Rutgers University, New Jersey, known for his “orgasm lab”, where he visually maps what the female brain looks like in the throes of sexual release, says he's not convinced about the concept of HSDD or the promises of Addyi. “Nobody knows what Addyi actually does in the brain, just as nobody knows where libido is regulated in the brain, because it's so hard to get funding for work on female sexuality.”

Komisaruk accepts Millheiser's study, but says that the women who got aroused but were not aware of it might just need to “become more aware of their bodies”.

Nan Wise, a New Jersey-based cognitive neuroscience researcher and sex therapist, agrees. She believes that Addyi “pathologises something that is a typical response to being in a long-term relationship”.

She counsels her patients to “jump-start their engines” by investing in a vibrator. “Find out what does turn you on. Our erotic tastes change at different points in our life.” She cautions that there is no magic pill for women. “You have to work out how to reinvent your erotic life. And that often involves a little contemplation.” ●