

# Pedophilia

- ICD-10: **Pedophilia** F65.4 (<https://mkn10.uzis.cz/prohlizec/F65.4>)

**Pedophilia** is '**sexual orientation towards pre-adolescent, i.e. childish objects without expressed secondary sexual characteristics**. *Pedophilic orientation can be heterosexual, homosexual, or bisexual in nature. The frequency of individual forms of this deviation can also be assumed in the given order.*

## Etiology

We are not aware of any generally accepted etiological concept of pedophilia. **Predisposition for her should be the absence of those instinctive mechanisms that suppress sexual tendencies in relation to child objects. Such mechanisms in relation to the ``juvenile features of the object are well known experimentally in subhuman animals. However, it cannot be ruled out that erotic interest in children is inhibited by learned processes. Learned inhibitions can be weakened primarily by socially defective influences and upbringing or emotional deprivation in childhood. The important thing is that only a small part of pedophilic individuals clearly prefer children's objects to adults. Most pedophiles are also capable of erotic reactions to mature objects. Their orientation is therefore not as pronounced in this direction as it can be seen in homosexual people.**

## Prognosis

Pedophilia, similar to sexual identification disorders, has the nature of a *lifelong orientation*, persistent characteristics. Only manifestations change with age. The subject copes with his pedophile tendencies in different ways. They can be completely denied and repressed. In such cases, there is sometimes a *sublimation of pedophilic tendencies*. For example, to top works of art, or to excellent performances in the field of working with children and pedagogy.

Elsewhere, the pedophile individual fails to suppress deviant tendencies and tries to act them out. Some show a strong interest in pedophile objects already in adolescence. Others do so only at a later age, sometimes even in old age. As if with a decrease in sexual activity it became more and more difficult for them to realize themselves with an adult object.

If the pedophile's approach to the object is not aggressive, any sexual contact with the child sometimes remains hidden for a very long time. Pedophiles skillfully infiltrate the child's world. They use their *ability to empathize with the psyche of children*. Intimate contacts can take the form of play or instruction, a kind of "sex education". A pedophile most often achieves his satisfaction through masturbation. Sometimes he exposes his genitalia in front of children. Genital connection is relatively rare in pedophile contacts. However, with a prepubertal child, anal and vaginal coitus are always traumatic and dangerous. The appearance of minor injuries on the genitals and anus, as well as the appearance of condyloma in the anogenital landscape, are among the symptoms that should raise suspicion of sexual abuse.

## Treatment

It is likely that most pedophile men will never seek out a doctor or sex counselor. Their focus may not be a major problem for them throughout their lives. Compensations in the marriage bond are usually well able. Any sublimation of pedophilic tendencies is not the subject of interest of sexologists, psychiatrists or psychologists. In counseling centers and ambulances, we mostly meet those pedophile men who have failed and committed some pedophile delict. If sexual adaptation is not possible for some reason (personality disorder, mental retardation) and there is a risk of further pedophile crimes, then short-term or even long-term suppression of sexual activity with appropriate therapy should be considered.

The level of danger is higher where pedophilia is combined with elements of sexually aggressive, or even sadistic. Fortunately, there are not many such cases.

Close to pedophilia is ``ephebophilia (*homosexual*) or hebephilia (*heterosexual*), which is a specific erotic orientation towards young pubescent objects. Homosexual men in particular sometimes suffer from this paraphilia and seek out boys aged 12-14 for intimate sex. Such a preference has the same connotations as true pedophilia, requiring consistent therapeutic measures. On the other hand, a similar "specialization" of heterosexual men on girls in puberty is not so pathologically pronounced. Only rarely does it require specific treatment.

## Links

## Related Articles

- Sexual preference disorders
- Homosexuality
- Sexual Offense

**External links**

- [Pedophilia \(Czech Wikipedia\)](#)
- [Pedophilia \(English Wikipedia\)](#)

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