Sexuality Throughout a Woman’s Lifespan

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Reproductive Health Update
4/24/15

Learning Objectives

• Understand how, when and why to ask questions about sexuality
• Understand some common issues that relate to sexual dysfunction
• Understand basic treatment methods for different etiologies of sexual dysfunction
Sexuality

- Ask questions in a non-judgmental way
  - Recognize your own biases
- Ask only questions that are pertinent to health
- Ask questions using simple words (i.e. avoid words like “contraception”)

Cultural Differences
Questions to Ask

• Sexual activity
  – Are you sexually active?
  – Have you ever been sexually active?
  – Are you planning to become sexually active?

• Type of sex
  – Oral, anal, vaginal, sex toys

• Do you have sex with men, women, or both?
  – 5.2% of males and 12.5% of females 15 – 44 report engaging in sexual activity with the same sex
Questions to Ask

• Safety
  – Do you use condoms during sex?
  – Do you ever feel pressured to have sex?
• Contraception
  – Are you trying to get pregnant?
  – What do you do to prevent pregnancy?
• Pleasure
  – Are you satisfied with your sex life?
• Pain

Case 1: Adolescence

• 15 year old comes to your office with complaint of heavy periods
• She is thinking of becoming sexually active
• What questions do you ask her?
• What advice do you give her?
Adolescence

• Discovering sexuality
• Sex education does not increase sexual activity but actually increases safe sexual practices

Non-coital Sexual Activity

• Often initiated at approximately the same age as vaginal intercourse
• Perceived as “less risky”
• Only 15% of males and 11% of females who engage in oral sex have ever used a condom
• Can still transmit STDs
• Rate of STD transmission is highest with anal sex
  – True for all STDs, but HIV is 5 times more likely to be transmitted through anal sex than through vaginal sex
  – Oral sex is a common mode of transmission of HSV
Case 2

28 year old woman presents to your office with the complaint of “decreased libido”.

What questions do you ask?

She has been married for four years
She is taking OCPs for contraception
Her husband wants a child but she is not ready
She is an attorney and works 60 hours a week
She has anxiety and takes Paxil
She is fearful that her husband is cheating on her
Reproductive Years

- Social factors
- Metabolic causes
- Medication side effects
- Dyspareunia

Social Factors

- Sex becomes tied to fertility
- Sex becomes associated with a time of day
- Loss of interest in relationship
- Stress
- Time management
Treatment for Social Factors

- COMMUNICATION!
- Date night
- Scheduling time for intercourse
- Couples counseling
  - American Association of Sex Educators, Counselors and Therapists
  - http://www.aasect.org/

Metabolic Causes

- Hypersexuality
  - Androgen secreting tumors
  - Manic episodes
- Hypossexuallity
  - Hypothyroidism
  - Premature menopause
Medication Side Effects

• Oral contraceptive pills
  – Increase Sex Hormone Binding Globulin
  – Decrease testosterone
  – Alternative types of contraception can be used
• Serotonin Reuptake Inhibitors
• Anti-epileptics
• Marijuana and EtOH

Dyspareunia
(with penetration)

• Vaginismus
  – Involuntary contracture of the muscles surrounding the introitus causing pain with penetration
  – Best treated with pelvic floor physical therapy
• Vulvodynia
  – Provoked pain when touching vestibule
  – Treated with pelvic physical therapy and topical analgesics
Dysparenia
(Deep)

• Endometrisosis
• Ovarian abnormalities
• Retroverted uterus
• Pelvic infection

Case 3

• A 55 year old woman comes to your office for her annual exam.
• What questions do you ask her about sexuality?
• She reports decreased interest in sex, pain with intercourse, and the inability to achieve an orgasm.
Peri-Menopause and Menopause

- Decreased hormones
- Dyspareunia
- Body image issues
- Male partner issues (erectile dysfunction)
- Relationship issues

Hormones in Menopause

- Dramatic drop in estrogen and testosterone
- Hormone replacement therapy
  - Estrogen can be beneficial but is only approved for the treatment of hot flushes
  - Testosterone can improve libido
Dyspareunia in Menopause

- Vaginal atrophy
- Can cause a psychological avoidance of arousal and engagement in intimate activities
- Treatment
  - Vaginal estrogen
  - Vitamin E tablets
  - Lubrication

Body Image/Relationship
Resources

• http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Adolescent-Health-Care/Addressing-Health-Risks-of-Noncoital-Sexual-Activity

Learning Objectives

• Things to cover: how to ask questions about sexuality, causes of sexual dysfunction including dyspareunia (dryness, endometriosis, circumcision), psychological issues (rape, religion, culture), issues with libido (hyper and hypo), effects of media (“am I normal”?)