



## BASIC INFORMATION

### DESCRIPTION

Female sexual dysfunction may involve an inability to experience sexual pleasure (arousal dysfunction); or an inability to achieve orgasm (orgasmic dysfunction).

### FREQUENT SIGNS AND SYMPTOMS

- Lack of sexual desire.
- Inability to enjoy sex.
- Lack of vaginal lubrication.
- Failure to achieve orgasm, even when sexually aroused.

### CAUSES

- Inadequate or ineffective foreplay.
- Psychological problems, including depression, poor self-esteem, sexual abuse or incest.
- Feelings of shame or guilt about sex.
- Fear of pregnancy.
- Stress and fatigue.
- Acute illness or chronic illness, especially of the central nervous system or endocrine system, as with multiple sclerosis or hypothyroidism.
- Inexperience or inadequate information about sexuality on the part of either partner.
- Repressed anger toward the sexual partner that may result from feelings of being used as a sexual object, physical or emotional abuse, jealousy or fears of disloyalty, or lack of true intimacy.
- Drug abuse including alcohol.
- Gynecologic factors (infection or other disorders).

### RISK INCREASES WITH

- Use of some medications, such as MAO inhibitors, antidepressants, beta-adrenergic blockers.
- Couple discrepancies in expectations and attitudes toward sex.
- Proximity of other people in the home (children, mother-in-law).
- Hysterectomy with removal of ovaries.
- Menopausal women (reduced estrogen levels affect sexual function).

### PREVENTIVE MEASURES

- Talk with your partner about your sexual needs and feelings.
- Seek counseling to resolve feelings about past sexual trauma or abuse.

### EXPECTED OUTCOME

Best predictors of positive outcome are the desire to change and an overall healthy relationship. Arousal dysfunction is more difficult to treat and outcome may vary. Admit the problem and try to establish open communication with your partner. Pretending that you are aroused or have orgasms leaves the problem unsolved.

### POSSIBLE COMPLICATIONS

- Permanent inability to enjoy sex.
- Damage to interpersonal relationships.



## TREATMENT

### GENERAL MEASURES

- Diagnostic tests may include laboratory blood tests and other studies to rule out physical causes of arousal or orgasmic dysfunction.
- If no physical problems are found, a detailed sexual history is the most important tool for determining an appropriate treatment program.

Possible treatment methods:

- For childhood sexual abuse problems—psychotherapy or counseling.
- For arousal dysfunction—relaxation techniques, sensate focus exercises, counseling (usually with a sex therapist).
- For orgasmic problems—self stimulation, new behavior patterns, and sexual homework with partner (usually in conjunction with treatment from a sex therapist).
- For medication-caused problems—change in dosage, discontinuance, or a change to a different medication.
- Other problems—family therapy, sensate conditioning, referral to a specialized sex therapist.
- For more information, check the library or the internet.

### MEDICATION

Hormone therapy may be helpful for some women, but medication is not necessary unless the sexual problem is due to some underlying medical condition. Viagra (currently used for male sexual dysfunction) is being studied for use in women. There is no known aphrodisiac that is effective and safe.

### ACTIVITY

No restrictions. Exercise regularly to reduce stress and improve your self-image. A healthy body and mind make enjoyable sex more likely.

### DIET

Eat a well-balanced diet. Vitamin and mineral supplements may be helpful. Weight loss program may be recommended if either partner is overweight.



## NOTIFY OUR OFFICE IF

You or a family member has sexual dysfunction problems and wants help in resolving them.