

Sunday November 4, 2007

Sexual problems

WOMEN'S WORLD BY DR NOR ASHIKIN MOKHTAR

Sexual dysfunction in a woman may affect desire, arousal, orgasm and sensation of pain.

IN my last article, I talked about female sexual dysfunction, a common medical problem affecting women's sexuality. About 20% to 50% of women suffer from this at some point in their lives, and it can be very distressing.

I also described the various causes that can lead to female sexual dysfunction – these range from biological and physiological factors, to psychological and interpersonal factors.

Just as there is a range of causes for female sexual dysfunction, there are also different forms of this multi-dimensional condition. Sexual dysfunction may affect your desire, arousal, orgasm and sensation of pain.

Before I explain these different forms, it will help to understand how a woman's sexual response works.

Female sexual response

Your sex drive begins with desire, an interest in sexual activity. Sexual desire can fluctuate according to physical or psychological factors. For example, when you are feeling good emotionally and physically, and when your relationship is going well, you will feel an abundance of desire.

However, if things aren't going well, such as you're not getting along with your partner, you are sick or you are facing too much stress, your desire can fade away completely.

A woman's sexual response occurs in a cycle. The first stage is *excitement*, which is triggered by psychological or physical stimulation. Her heartbeat will quicken, she will breathe faster, and she will experience vaginal swelling and lubrication.

In the next stage, called the *plateau*, the excitement is sustained. Vaginal swelling, heart rate and muscle tension may increase as long as the woman is stimulated. Her breasts will enlarge, her nipples become erect and her uterus dips.

The third stage is *orgasm*, where the vaginal, anal and abdominal muscles contract, and the woman experiences intense pleasure.

Finally, there is the final phase, the *resolution*. Blood rushes away from the vagina, the breasts and nipples shrink, the heart rate, breathing and blood pressure return to normal.

Forms of sexual dysfunction

Sexual dysfunction can affect one of, or several, stages of the cycle described above. It is not just a matter of “not feeling up to it”.

Sexual desire disorders

There are two types of disorders affecting the sex drive. Firstly, there is hypoactive sexual disorder (hypo = low). With this disorder, you have a lack of sexual desires, sexual fantasies or any interest in sexual activity at all.

Another more extreme form is sexual aversion disorder, which is a kind of phobia. You will persistently feel repulsed by sexual contact with your partner and try to avoid it completely. This can be very distressing for a woman, as she may not be able to understand why she feels this way.

Sexual arousal disorder

There are disorders that affect a woman’s arousal. She cannot be sexually turned on and doesn’t experience the physical sensations of being ready for sex. For example, she does not experience vaginal lubrication, clitoral and labial swelling, or swelling of her nipples.

Orgasmic disorder

Some women have difficulty or cannot reach orgasm, even after they are sexually stimulated and aroused. Some women have never achieved orgasm in their lives, while others may have had orgasms before but have stopped having them.

This form of sexual dysfunction troubles a lot of women, who think that they are abnormal for being unable to achieve orgasm.

Sexual pain disorders

If you persistently suffer from genital pain during sexual intercourse, you have a condition called dyspareunia. The pain can occur when your partner attempts to penetrate you, when there is friction between his penis and your vagina, or when he thrusts.

Some women suffer from intense pain when their partners try to penetrate them. This may be because of a condition called “vaginismus”, where a woman unconsciously contracts the outer muscles of her vagina and blocks penetration. Vaginismus is often associated with women who have sexual phobias or have been sexually abused in the past.

Non-coital sexual pain disorder

Lastly, there is a form of sexual dysfunction where women suffer from persistent genital pain during sexual stimulation without intercourse. This means that even stimulation of the outer genitals, without penetration, can cause pain.

Treating sexual dysfunction

As you can see, the causes and types of sexual dysfunction can be so varied. Therefore, there is no single cure-all for these disorders. Treatment will depend on each individual woman and her partner.

Firstly, there is a lot that you and your partner can do together to overcome sexual problems.

If your sexual desire is being affected by problems in your life and relationship, you need to work those out.

Sex is no longer spontaneous in our high-pressure, career-driven lives – so you need to make an effort to keep the flame alive. Make a date with your partner for sex – this helps you prepare your body and mind in advance, eliminate fears and look forward to a good time.

Give sex some prime time; don’t make it a rushed affair at lights-out just before going to sleep. You can even set aside some leisurely time in the morning or afternoon for it (nothing wrong with sex in the daytime!).

If you have some pain or discomfort, here are some simple things you can try.

First of all, relax! Practise some Kegel’s exercises to learn how to relax your vaginal muscles. If it’s vaginal dryness that’s bothering you, use water-based lubricants like K-Y jelly. Finally, experimenting with new foreplay techniques or positions may make you more comfortable.

There are also medications that may help, such as sildenafil, testosterone, phentolamine or hormone replacement therapy. You should only take these after you have discussed the problem with your doctor.

There are also devices, such as clitoral therapy devices and vaginal trainers to help relax the muscles of the vagina.

You may also want to consider non-medical therapies, such as sex therapy and psychotherapy. Sex therapy focuses specifically on the sexual problems in a couple's relationship, while psychotherapy is where a counsellor works with you and/or your partner on your emotions and relationship problems.

There is nothing to be ashamed or frightened of. The most important step towards treating sexual dysfunction problems is for you to be open with yourself and your partner about it.

- *Datuk Dr Nor Ashikin Mokhtar is a consultant obstetrician & gynaecologist (FRCOG, UK). She is co chairman of Nur Sejahtera, Women & Family Healthcare Program, Ministry of Women, Family and Development. For further information, e-mail starhealth@thestar.com.my. The information provided is for educational and communication purposes only and it should not be construed as personal medical advice. Information published in this article is not intended to replace, supplant or augment a consultation with a health professional regarding the reader's own medical care. The Star does not give any warranty on accuracy, completeness, functionality, usefulness or other assurances as to the content appearing in this column. The Star disclaims all responsibility for any losses, damage to property or personal injury suffered directly or indirectly from reliance on such information.*