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Sorry dear, I've a headache

Women's World

By DR NOR ASHIKIN MOKHTAR

WHEN women talk about finding true love, they are looking for a Mr Right who matches them in every way: emotionally, intellectually, spiritually and sexually.



Sex is not just a physical act – it depends a lot on social, emotional, spiritual and mental well-being. – Reuters

But life is not a fairy tale – it's not Happily Ever After that follows, but the reality and the hustle and bustle of everyday life.

Sexual compatibility is one of the most fundamental aspects of a healthy relationship, but may be the hardest to deal with.

Most couples find that their sexual appetites differ at least some of the time. These differences may appear only under particularly stressful circumstances, or be apparent throughout the relationship.

As a woman, your sexuality is a complex thing, coordinated by the neurological, vascular and endocrine systems – in other words, anywhere other than below the waist and between the legs!

Your sexuality is also tied in to your family, societal and religious beliefs, as well as your age, health and personal experiences. Sexual activity also incorporates your relationship with your partner.

Needless to say, a breakdown in any of your physiological systems, your psychological well-being or your relationship, can lead to sexual dysfunction.

Female sexual dysfunction

Female sexual dysfunction is a medical condition related to problems with a woman's sexuality.

Women who suffer from female sexual dysfunction find it physically and emotionally distressing, and a disruption to their social lives. By no means should it be dismissed as trivial, or referred to in derogatory terms like "frigid".

It is a very common condition, affecting between 20% and 50% of women at some point in their lives. It is a persistent condition, caused by a combination of biological, psychological and interpersonal factors.

Female sexual dysfunction symptoms are persistent, pervasive and cause personal distress. If you experience sexual problems like low levels of arousal only once or twice, it is most likely due to a stressful event in your life and not female sexual dysfunction.

Causes: medical and physiological problems

One of the main causes of female sexual dysfunction is any major pelvic surgery or injury, which may have damaged the nerves and blood vessels leading to the vagina, uterus and clitoris.

If this happens, the blood flow through the arteries may be reduced or cut off entirely, leading to a loss of sexual sensation. You may find yourself less able to become sexually aroused.

One of the surgeries that may cause this is hysterectomy, which is the removal of the uterus, and sometimes the cervix, fallopian tubes, ovaries or part of the vagina. A hysterectomy can affect arousal, orgasm, lubrication and sensations in the cervix.

Injury can also occur during childbirth. Using suction or forceps can cause vaginal tearing, as well as nerve and vascular damage in the vagina and clitoris.

An episiotomy during childbirth (where the doctor makes a cut from the base of the vagina towards the anus to make it easier to deliver the baby's head), may also cause sexual problems.

Other rarer injuries that may cause female sexual dysfunction are pelvic fractures and straddle injuries.

One of the other physiological causes of female sexual dysfunction is blood flow problems, where there is less blood flow to the pelvic region and genitalia, causing less arousal. These problems could be caused by coronary heart disease, high blood pressure, high cholesterol, smoking or prolonged bicycle riding.

Finally, there are the hormonal problems that can lead to female sexual dysfunction. Your hormone balance may be disrupted by various conditions, such as menopause, endocrine disorders, post-partum hormone deficiencies and diabetes.

Menopause is the most common hormonal cause, which explains why female sexual dysfunction increases with age.

Causes: psychological problems

Sex is not just a physical act – it depends a lot on your social, emotional, spiritual and mental well-being.

As mentioned earlier, your sexuality is inseparable from your family societal and religious beliefs, while a healthy sex life is the result of love, trust and communication between you and your partner.

Your sexuality begins with you – so if you have problems like depression, stress, sexual or emotional abuse, and drug and alcohol use, you need to overcome these problems with the help of your family, friends and doctors.

You need to have good body image and self-esteem problems, in order to feel sexual. You should not allow your sexuality to be dictated by other people's expectations, such as what you read or see in the media.

Finally, you need to look at what's happening in your relationship. Are there communication problems between you and your partner? Do you have trust issues? Is anger clouding your ability to talk to each other? Is there a lack of intimacy in your relationship? All these can affect your interest in, and response to, sex, whether you realise it or not.

Female sexual dysfunction will not go away on its own. You need to be open with yourself, your partner and your doctor, so that you can all work together to treat this problem.

Next article in this column: Different forms of sexual dysfunction

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