



Sexuality as we Age

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The Circles of Sexuality and Aging

- Sexuality begins in utero as we are developing as human beings and ends with our death. ““from the womb to the tomb”
- “Closeness, intimacy and touch are lifelong needs that do not get old, even when we do. We may be graying but our rainbows are still flickering, as our sexuality evolves and changes over our lifecycle. It is simply not true that when we are lighting dozens of candles on our birthday cake that we lose interest in sex or that our lives as sexual beings are over. Sexuality evolves and changes as we age, but is still very much a part of who we are until the day we die”.
- Too often the words sex and sexuality are used interchangeably, and that may lead to diminishing the value of sexuality as we age.
- One can think of sex as what happens below the waist, and in between the legs (behaviors) vs. sexuality.
- Sexuality is the total expression of who we are as human beings. It is the most complex human attribute and encompasses our whole psychosocial development – our values, attitudes, physical appearance, beliefs, emotions, attractions, likes/dislikes, our spiritual selves. This is all influenced by our values, culture, socialization, politics, and laws.

Terri Clark, The Circles of Sexuality and Aging, American Society on Aging

Benefits of good Sexual Health

- The benefits of sex extend beyond the bedroom.

Can Improve Physical Health – sex improves physical stamina, burns fat and calories, boosts immunity

Can improve Mental Health – sex causes the brain to release of endorphins, drastically reduces anxiety

Increases lifespan – through it's health improving benefits, a good sex life can add years to your life

Solidify relationships – sex is a chance to express the closeness of your deepest relationship

Give refuge – sex gives couples a chance to escape from the sometimes harsh realities of the world

Better Sex as You Age, HelpGuide.Org

Importance of Discussing Sexual Health

We have learned a lot about women's perceptions regarding their sexual health in the 2008 Prevalence of female sexual Problems Associated with Distress and Determinants of Treatment Seeking Study (PRESIDE).

- 43% of 31,581 respondents reported female sexual dysfunction (FSD) in sexual desire, arousal, or orgasm
- 11.5% of these respondents were distressed about it
- 14.8% of women aged 45-64 reported the highest rate of distress
- 10.8% of women aged 18-44
- 8.9% of women 65 and over
- most prevalent dysfunction reported was hypoactive sexual desire disorder (in 2013 actually given name in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition) Again, mid life women (45-64) reporting the most distress.

-OBG Management

“When sex is bad or nonexistent, it plays an inordinately negative role, reducing the quality of a relationship by 50-70% in some studies.” (Dr. Susan Kellogg Spadt)

Sexuality in the younger generation

- Concerns for pregnancy
- Concerns for sexually transmitted diseases
- Physical/Mental Health Issues
- Busy work lives
- Busy family lives
- Sexual dysfunctions (10.8% women)
 - low libido
 - inability to achieve orgasm
 - dyspareunia (pain with intercourse)

Sexuality from midlife and Beyond

- Emotional obstacles: life stress as children leave home, anxiety, and depression can affect interest in sex and the ability to become aroused. This may interfere with the ability to connect emotionally with your partner.
- Body Image: As more wrinkles, gray hair, love handles or cellulite appear, you may feel less attractive to your partner. These feelings can make sex less appealing and cause less interest.
- Low self-esteem: changes at work, looming retirement and other major life changes such as aging parents requiring time and attention, may leave you feeling temporarily uncertain about your sense of purpose. This can undermine your self esteem, create stress and fatigue making one feel less attractive and sexually interested.
- Worry over performance: worrying about how you will perform, or whether you are worthy of sexual attention from your partner, can lead to impotence in men and lack of arousal or orgasm in women

Better Sex as you Age, HELPGUIDE.ORG

Why do sexual desire and behavior change?

- Changes in sexual desire and behavior throughout the life cycle are normal, though intimacy and connection remain important into later life.
- The best predictor of sexual interest and activity in later years may be the frequency of sexual activity when you're younger. If sex is central to your lifestyle and happiness at age 30, it will probably still be important at age 60 and beyond.
- When sexual activity decreases or ceases: common causes

For Men

- lack of desire, usually resulting from medications
- difficulties maintaining an erection
- poor general health

For Women

- hormonal changes linked to menopause (natural and surgical)
- lack of desire, sometimes related to medications
- loss of partner

Physical Effects of Menopause

Reduced levels of the hormones estrogen and progesterone:

- less natural vaginal lubrication
- tightening of the vaginal opening
- thinning of vulvar/vaginal tissues
- narrowing and shortening of the vagina
- low or absent sexual desire
- urinary incontinence
- weight gain
- risks for osteoporosis
- vasomotor symptoms (hot flushes)
- forgetfulness (menopausal brain)

Effects of Menopause that can effect Sexuality

- Vaginal Dryness- by far the most common problem that women report.
- Pain with intercourse and vaginal bleeding due to atrophy of tissues
- Slower response to mental and/or physical sexual stimulation
- Total lack of interest or an aversion to sex
- Leaking of urine during sex
- Hot flushes occurring with sexual activity
- Difficulty/discomfort with sex positions

Medical interventions

- Discuss current medications you are taking with your clinician that may be affecting sexuality
- Hormone replacement therapy
- Physical Therapy
- Surgical intervention
- Medications for low libido, dyspareunia and vasomotor symptoms.
Addyi - for pre menopausal women. Restricted distribution in the US
Brisdelle - for postmenopausal hot flushes
Osphena – for postmenopausal dyspareunia (pain with intercourse)

Non medical strategies for staying sexual after menopause

- Many women, clinicians and sex therapists report the reality of the use-it-or-lose-it factor. Regular sex, either with a partner and/or masturbation definitely helps keep vaginal tissues more supple and moist.
- Liberal use of a water based bio adhesive lubricant is often enough to make intercourse more comfortable.
- Daily use of a non prescriptive vaginal moisturizer such as “Replens” and/or coconut oil on a daily basis may be helpful.
- Healthy diet. DRINK WATER! Limited use of alcohol.
- Don’t smoke.
- Daily physical activity (aerobic and strengthening exercise)
- Yoga, relaxation, meditation and mindfulness exercises
- Over the counter supplements and herbal therapies (soy isoflavones, black cohosh)

More Strategies:

- Talk with your partner; this may be difficult as when sexual problems occur, feelings of hurt, shame, guilt and resentment can occur as well; find the right time, avoid criticizing, let your partner know the changes you are experiencing in your body. Be honest about what you are experiencing physically and emotionally. This shows commitment, care and concern for the relationship.
- Set aside time to be sensual and sexual together, share your thoughts about love making. Let your partner know what is good for you. Ask same for your partner.
- Reading or watching erotica, being mindful of erotic thoughts as they occur, use imagery, fantasy, focus on sensation during arousal avoiding distractions. Be present.
- Take time for foreplay, use vibrators or Fiera* (device that provides a low level of vibration to the clitoris and anterior vulva to increase stimulation)
- Practice “Kegel Exercises” – doing these several times a day may be all that is needed to check surprise leaks. Well toned genital muscles may also enhance more intensive orgasms for both women and men.

The Takeaway

Sexuality evolves and changes as we age, but is still very much a part of who we are until the day we die.

Your sexual well-being goes hand in hand with your overall mental, physical and emotional health.

It is normal for sexual desires and behaviors to change as we age, but sex and physical intimacy remain important to many older adults.

Dealing with sex issues can be a daunting proposition and many of us might prefer to sweep them under the carpet, read a book, finish a report, or paint the bathroom, anything that doesn't cause such anxiety and frustration. But there are many solutions available to try. So be proactive!

“When sex is good, it adds a little bit- like icing on the cupcake- to a good relationship” (Dr. Susan Kellogg Spadt)

“Sexuality and sexual expression are among life's greatest gifts, and ours to explore, tweak, enhance and enjoy on any level that is possible and comfortable for all of our lives” (Rebecca Chalker, www.clitoraltruth.com.)

Questions,

Comments,

Thoughts?

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