

# HYPOACTIVE SEXUAL DESIRE (LOW SEX DRIVE) FEMALE AROUSAL DISORDER (PROBLEMS WITH ORGASM & GENITAL SENSATION)

More than 40% of women complain of sexual dysfunction- low sexual desire or drive and/or problems with orgasm and arousal. Although it is a very common feminine issue, women do not know who to turn to for evaluation and treatment. Sexual dysfunction can impact self-esteem, relationships, and quality of life.

**Hypoactive Sexual Desire Disorder or low sex drive** is defined by the lack of or reduced sexual interest, reduced sexual thoughts, or sexual initiation and unreceptive to partner's attempts to initiate.

**Female Arousal Disorder or problems with orgasm and genital sensation** is defined by absent/reduced sexual excitement/pleasure during 75-100% of sexual encounters, or to internal or external sexual erotic cues (written, verbal, visual).

## Risk Factors for sexual dysfunction

- Aging and menopause: reduced testosterone, low vaginal estrogen
- Chronic medical conditions: diabetes mellitus, hypertension, depression, heart disease
- Pelvic surgery and pelvic disorders: pelvic floor muscle spasm
- Neurological disorders: multiple sclerosis, epilepsy, paralysis
- Endocrine disorders: Addisons disease, hypothyroidism
- Medications: birth control pills, anti-depressants and anti-anxiety medications, antihypertensives, steroids, statins
- Infection: sexually transmitted disease or genital warts

The evaluation for low sex drive and/or arousal disorder involves a complete history of medications, surgeries, and sexual experiences, ability to use tampons, musculoskeletal injuries and relationship status and wellbeing. A complete examination is done, observing the health of the vulva, hymen and vagina, performing a vaginal culture, and palpating the vulvar and vaginal muscles, as well as the pelvic organs

## Treatments for sexual DYSFUNCTION

**Education** about current modifiable risk factors (perhaps change in medication), sexual response and anatomy, **foreplay and sexual positions, and use of sexual aides.**

**Lubricants** can be helpful for ease of sexual penetration. **Zestra** oil for local stimulation.

**Medications** can address hormonal status and/or arousal through serotonin levels.

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Hormone replacement with estradiol, **testosterone**, progesterone will improve sexual thoughts and interest, arousal and response.

**Vaginal estradiol cream** can be applied to the vulva 3x a week to maintain health.

**Flibanserin** is the newest drug- FDA approved for premenopausal hypoactive sexual desire. No alcohol consumption while taking this medication.

**Pelvic Floor Physical Therapy** can treat the tight muscles of the pelvic floor and local massage with vibrators/dilators or wands can help improve relaxation and blood flow to the area.

**ThermiVa** is a non-hormonal and non-surgical treatment that uses radiofrequency to gently heat the tissue to cause improved blood flow and elasticity, improved orgasm and lubrication.

**Psychological therapy**, including couples therapy, is important help women address barriers to sexual wellness and for partners to have similar sexual goals.

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