SEX AFTER MENOPAUSE

Many women find that going through menopause does not impact their sex life. Some even find it even more exciting than ever because they are no longer concerned about becoming pregnant. For many women, though, some of the physiological effects of menopause does impact their enjoyment of sex. It is important to understand that these effects can be treated, and sex after menopause can be very fulfilling and enjoyable.
Symptoms of Menopause that Affect Sexual Enjoyment

During menopause, there are certain physiological changes that can interfere with the enjoyment of sex. Due to loss of estrogen, these symptoms include:

* Hot flashes that can occur at any time, causing discomfort and irritability

* Night sweats that interfere with a woman's sleep, thereby decreasing her desire for sex

* Vaginal dryness
* Loss of androgens (including testosterone) that can lower a woman's sex drive or libido

It is likewise important to note that a woman's desire for sex can be affected by other physical changes related more to aging than to menopause. These changes may include:

* Decreased blood flow to the pelvis - ovaries no longer need as much nourishment, and the reduced blood flow causes the vagina to become smaller and less elastic
* Walls of the vagina may become thin and tender, causing intercourse to be very painful
* Problems with urine leakage or increased urinary frequency due to weakening of pelvic muscle support

Treatment

For both menopause-related symptoms, as well as symptoms of aging, there are steps you can take to ensure an enjoyable sex life beyond menopause.

* Healthy living - exercise and a healthy diet can make a difference in your overall sense of well-being and dealing with some symptoms, like hot flashes
* Hormone Replacement Therapy - can reduce the incidences of hot flashes and night sweats, as well as treating vaginal dryness
* Various over-the-counter and prescription medications and sex techniques (be sure to discuss with your health care provider)
* Compensate for vaginal dryness through the use of over-the-counter water-based gel lubricants (such as K-Y Jelly, Replens, or Astroglide) during intercourse
* Continued sexual activity can also help to prolong and maintain vaginal health

Do Seek Advice

Often, sexual problems that are easily treatable are dismissed by many women as just a part of aging. If continued sexual fulfillment is important to you, be sure to discuss any problems you are experiencing with your partner and your health care provider.

Many women find that sex after menopause can actually be more enjoyable and fulfilling than in younger years. Find out what to expect and how to easily plan for some of the inevitable changes.
Menopause does not signal the end of female sexuality. In fact, many women find that intimacy is enhanced in midlife.

Several years ago Judy Grant, a 52-year-old lawyer, realized she was no longer getting her period, her vagina was drier than usual, and sexual arousal was taking longer. She began to worry that her sex life would soon disappear.

She had heard that at menopause, women lose their interest in and ability to have sex. But since she started using a little KY jelly to add lubrication and adjusted her expectations, she's found she enjoys sex more than ever. She especially likes the extra time she and her husband spend stroking and cuddling before they try to reach orgasm.

Like Judy, many women fear that menopause signals the end of their sexual desirability and pleasure. This fear comes from stereotypes of the midlife and older woman as unattractive and asexual. In addition, loss of the ability to bear children may become confused with loss of sexual desirability.
The reality is that the need for and capacity to have satisfying sexual relationships does not disappear as a natural or irreversible part of aging in women or men. According to Paula Doress-Worters, co-author of The New Ourselves, Growing Older and The New Our Bodies, Ourselves, "there is no reason to think that women in midlife should necessarily have problems with sexuality."

Although menopause does bring physiologic changes that may slow down response time and affect sexual activity in a variety of ways, 70%-80% of women do not experience a reduction in sexual activity or satisfaction. And for those who do, there are safe, effective solutions.

How you perceive and deal with the changes can have a significant impact on your sexual health and pleasure. Some women have a reawakening of sexual interest when they are no longer concerned about getting pregnant and adult or older children require less time and attention. However, there is tremendous individual variation in women's experiences.

Changes at Menopause That May Affect Sexuality

Physiologic changes at menopause can sometimes affect sexual activity and desire in some women. Changes may occur in lubrication, the vaginal walls, arousal, orgasm, and sex drive that make sex less comfortable and enjoyable.

Vaginal Dryness and Pain During Intercourse

The most common problem is vaginal dryness, although only about 20% of women experience it. The vaginal walls may also become thinner and less flexible. Itching, burning, and occasional pain and bleeding may occur during intercourse.

Over-the-counter water-based lubricants, such as Astroglide and KY jelly, can help with vaginal dryness. Do not use petroleum-based lubricants such as Vaseline. They weaken the latex in condoms and can cause vaginal infections. Vitamin E or moisturizers such as Replens can also help if used regularly.

If lubricants and moisturizers are not sufficient, vaginal estrogen cream, rings, or tablets are generally helpful.

Stimulation and Orgasm

Some women have fewer and less intense orgasms when they reach menopause. It may take more time and stimulation to become aroused. For all women, having intercourse or masturbating regularly can help increase sexual responsiveness and pleasure. They keep the muscles supporting the uterus, vagina, and bladder in shape and increase lubrication. Kegel exercises, contractions of the pelvic muscle near the vagina, can also help strengthen the vaginal muscles.

Sexual Desire

Loss of interest in sex, temporary or long-term, occurs in some women during and after menopause. Possible causes include the following:

* Fatigue
* Stress
* Illness
* Relationship problems
* Psychological issues
* Medication side effects
* Hormonal changes
* Discomfort from the physical changes of menopause

Relationship problems tend to be the cause of decreased sexual desire only when there have been ongoing difficulties in the relationship. These difficulties may be exacerbated by changes at menopause. If this is the case, consider seeing a therapist who specializes in sexuality.

If the problem is hormonal, estrogen may help. However, its effect is generally on the physical changes, such as vaginal dryness and pain during intercourse. No direct relationship has yet been found between estrogen levels and desire to have sex.

One study in particular published in the journal Menopause in September/October 2000, found no direct relationship between declining estrogen levels and desire to have sex. Rather, the researchers found that hormonal levels, health, and social changes associated with aging, and the mental and emotional effects of being recently menopausal probably work together to create changes in a woman's sexual desire. Longer-term studies are needed to determine whether reduced estrogen production affects a woman's sexual functioning as she gets farther from menopause.

A natural decrease in testosterone at menopause might play a role in sexual desire, although this remains unproven. Testosterone is available in pills, injections, and creams, but side effects are a major concern.

Increased Intimacy

The changes that take place in midlife can provide an opportunity to explore new and different sexual experiences. Men also go through changes, such as needing more time and stimulation to become aroused. The slower, more sensuous foreplay that often results is a welcome change for some women.

Increased focus on sensuality, intimacy, and communication can help a sexual relationship become more rewarding than ever. There are many ways of expressing your love besides intercourse:

* Hugging, cuddling, kissing
* Touching, stroking, massage, sensual baths
* Manual stimulation
* Oral sex

Sexual relationships after menopause can indeed be satisfying if you are able to adapt to the changes that occur.

A Note About Birth Control and Safe Sex

When you are having intercourse you need to continue using birth control until you have not had a period for 12 months in a row. However, protection against sexually transmitted diseases, including HIV/AIDS, remains a concern. Unless you are in a long-standing monogamous relationship, be sure to use a male latex condom or female condom, and preferably with the spermicide nonoxynol-9.

RESOURCES:

National Institute on Aging
http://www.nih.gov/nia

The North American Menopause Society (NAMS)
http://www.menopause.org
It's possible to restore post-menopausal sex drive, but do women want to?

The Orange County Register
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Women treat it like a dirty little secret. A "condition" they whisper to their physician, convinced they are unusual, strange, dysfunctional.

They say they don't like sex anymore. They say they've lost interest since menopause.

Or maybe their husbands or partners can't perform because of prostate surgery or blood pressure medication, and (is it possible?) they're relieved. Glad to have sex out of their lives.
So much for post-menopausal zest.

"Low desire is the most common complaint older women present at our clinic," says Dr. Jennifer Berman, co-director of the Female Sexual Medicine Center at UCLA.

This, says the doctor, is a problem that can be solved. Women willing to talk about it can find a solution, she believes.

She's not alone in assuming the embers are there, ready to flame if they're fanned.

Physicians, pharmaceutical companies and mainstream media are discovering that women's sexual dysfunction at midlife is a hot topic. Drugstore shelves are filling up with herbal remedies designed to spark love interest. A "female Viagra" is being developed. Clinics, such as the one at UCLA and another planned at the University of California, Irvine, cater to the sexual changes of post-reproductive women.

The problem is obvious. The solutions, if there are any, are not.

There are physical causes, such as hormonal imbalances and medications affecting sex drive and stifling sexual urges, Berman says. Appropriate treatments, such as hormone replacements and other medications, can make a difference, she says.

There are psychological causes such as cellulite-dimpled derrieres, age spots and wrinkles creating self-image concerns, counselors say. Women who don't feel sexy don't act sexy or respond to sexual overtures, they say. Therapists stress counseling to help women focus on their attractions, including the experience that comes with age.

There are natural reasons, such as evolution to grandmotherhood, researchers say. Viagra-emboldened senior studs are not "natural," they point out.

The truth is, no one has a magic pill for any of the causes.

While health professionals are trying to make sense of how and why sexual dysfunction occurs in midlife, they're proposing some solutions.

Getting down to the basics If sexual desire lessens, a good physical examination is the first step, according to Dr. Robert Butler, 76, and his wife, Myrna Lewis, 64, who co-authored the classic study "Love and Sex After 60" in 1976. The book was updated last year. Butler is founder of the International Longevity Center in New York.

Exercise and a healthy lifestyle are two ways to prolong sexual activity, Butler says.

Counseling women on relationships also is primary, Lewis says. She finds that many women who complain of lack of arousal are locked in a sexual relationship that isn't working for a number of reasons, from boredom to physical disabilities such as prostate surgery.

Lewis says many couples she counsels benefit from a growing maturity in their relationships. There is a familiarity, an understanding of arousal techniques that come with time.

For women at any age, sex is all in the mind, says Newport Beach, Va.-based psychologist Pat Allen.

"She's got to feel good about it, got to have the right attitude," she says.

Having sex with a longtime partner can get boring, she says, if he stops paying attention to her turn-ons.

And she suggests it's up to the women to change the atmosphere. Use your imagination, from sexy underwear to stimulating videos. Whatever works.

"You've got to remember that we're the magnets, and you've got to think like a magnet," she says. "What we forget is sex is an art form."

With aging and menopause, estrogen decreases, and some women experience a change in sexual function. Estrogen decline may cause hot flashes and vaginal dryness that makes intercourse painful, Berman says.

Low testosterone also can alter women's sexual response, she says. A drop in the male sex hormone, which women also produce, is thought to diminish sexual interest. At this time, there are no approved testosterone preparations for women, although clinical studies are under way, Berman says.

Berman will not say hormone replacement cures low desire, insisting there is no blanket solution for everyone, but she adds, "There is a role for testosterone in post-menopausal women."

Not everyone agrees.

There is no good data showing testosterone really affects libido, says Dr. Vivian Dickerson, a UCI Medical Center gynecologist and president-elect of the American College of Obstetricians and Gynecologists.

She says there seems to be a short-term benefit for women whose testosterone drops as

a result of menopause, but no data indicating a long-term benefit.

Researchers are studying the role of testosterone in women's sex drive, but it may be causing nothing more than the placebo effect, she says.

Women's sex drive is complex. It's tied to mood, body image, age, weight, "even how tired you are," Dickerson says. "All these things have tremendous impact on our sex drive at any age.

"Patients come to me and say, I don't want my husband to feel rejected, I don't want him to worry, but he's not doing anything for me sexually," she says.

"What women want from sex varies but is usually more snuggling, kissing, holding."

Couples should go away for two weeks to a place where there are no children or grandchildren.

"You need plenty of time to be together," she says.

"You have to talk to each other. You have to create levels."

On level one, the couple can touch and kiss but no more.

"Once you do that, spend a day touching and kissing, you know the ground rules about what pleases the other person. There's a freedom and communication," she says.

"I usually don't have to tell them when to go to level two."

The Butlers point out there is more to an intimate relationship than sexual intercourse.

"Outercourse" is the new psychological buzzword for intimacy without actual penetration. Touching, holding hands, cuddling can be satisfying sexual activity for seniors when the man cannot achieve an erection, they say.

Nature designed women to be more "forceful on the world stage" after menopause and naturally less inclined to think about sex, says Dr. Leonard Shlain, author of "Sex, Time and Power: How Women's Sexuality Shaped Human Evolution" (Viking, 2003).

Modern society short-circuits nature's plan with medicinal enhancements for sexual desire after menopause, he says.

Shlain's controversial theory says women invented time when they recognized their natural hormonal cycles.

They also equated menstruation with fertility, and a lack of menstruation with a natural shift away from sexual interest.

Using various enhancements to tinker with nature "upsets the hormonal clocks originally instilled in us," Shlain says. "This alters the course of nature."

There is a reason women stop menstruating, he says.

"By cutting off her ability to have children, nature lets women have the time and energy to help their daughters raise children. This is a clever strategy on the part of nature," he says.

"Nature shuts us down as an act of mercy," psychologist Allen says.

"Why? Because there's no point in feeling sexual when the guys your age don't have much push. Why do you suppose Demi Moore is with what's-his-face?" (That's Ashton Kutcher, for those who care.)

Aging women outnumber men 15 to 1, she says. "The men don't hold up, and those that do hold up don't want a 50-year-old woman anyway, so too many women feel they have to give up sex."

A shutdown is natural, she says. "We're not supposed to be available to men because all the men are supposed to be dead," she says.

UCI Medical Center's Dickerson points out that bodies change with menopause and that most people are in denial about the effect of age on their sex drive. "We have to come to grips with aging," she says.

How?

"I think we expect things to be the same with us always, but there are natural modulations of things when time goes on.

"We can't see as well at 50 as we did at 20, yet we expect to have the same sex drive."
Enjoying Sex After Menopause: Expert Advice

How to enjoy sex after menopause

An article in the February 2004 issue of the Journal of the American Medical Association (JAMA) contained a research study on sexual dysfunction that garnered extensive media coverage. The findings may surprise you: 43% of women and 31% of men in the US suffer from sexual dysfunction. Pretty large numbers. Significantly more people have sexual issues than Hollywood, fashion magazines, and even many doctors

lead us to believe.

Simply stated, sexual dysfunction is a common problem. Almost half of all American women struggle with it. Viagra has come to the rescue of many aging men, but what about women? So far women been left out in the cold.

However, there are some new herbal formulations that hold out the promise of improved sexual stimulation and response for females. Many women have reported significant improvements in sexual pleasure, both before and after menopause, with the use of these products. You could consider trying one of these female sex stimulants to help improve your sex life.

The truth is that as women age and reach menopause, many women lose interest in sex. Their bodies simply stop producing the same levels of sex hormones as they did when they were younger. As sex hormone levels decline, so does desire. To make matters worse, many women develop vaginal dryness, which can make sex painful.

At the same time, some men are losing their drive and ability to perform, so their female partners may not even notice the drop in their own libido. But now that we know better -- and men are finding help -- women should make an effort to get a piece of the action!

I've listed below four suggestions for increasing your sex drive, enhancing arousal, and combating sexual problems after menopause. Give them a try and see if you notice a change for the better.

1.

Hormones: Why worry about hormones? Because scientists have begun to realize that menopause devastates us hormonally. Women produce less and less testosterone, the "male" sex hormone, as they age. By the age of 40, they have half as much testosterone as they did when they were 20. Research has shown that a low testosterone level means lack of sexual desire. As if that weren't enough, estrogen levels also decline by 80-90% during menopause. Low estrogen levels cause vaginal dryness, which leads to painful intercourse, and diminished blood flow to the vagina, which interferes with arousal and pleasure during sex.

This may be devastating to some women. Many doctors recommend hormone replacement therapy (HRT) as a solution.

Taking estrogen can help rid you of all symptoms of menopause including moodiness, vaginal dryness, and hot flashes. In addition, it may reduce the risk of cardiovascular disease, osteoporosis, and some cancers. Testosterone therapy has been shown to enhance desire, induce feelings of well being, and combat menopausal symptoms.

However, testosterone may produce unwanted side effects such as acne, increased risk of heart disease and breast cancer. HRT is a serious treatment with many important factors figuring in. It should be carefully considered with your doctor.

2.

Supplements: For many women, the real problem is not lack of sexual interest but a generally low energy level. They work, manage the household, take care of the kids, husbands and parents, and at the end of the day simply don't have the energy to engage in sexual activity. To give yourself an added boost, try taking a nutritional supplement with ginseng or ginkgo. Both herbs have been taken for hundreds of years as natural energy enhancers.

Supplements can also provide our bodies with the raw materials they need to perform better, naturally.

For example Arginine, an amino acid that is found in nuts, meat, and dairy, enhances blood flow. Taking a supplement with Arginine, ginseng, and ginkgo biloba can improve arousal by increasing the flow of blood to the clitoris-vagina area during sexual activity, together with boosting energy levels.

Provestra is a herbal supplement that has proven to be specifically useful for enhancing sex drive, libido and sexual response in women after menopause. You should consider trying this out for yourself.

3.

Diet: I have a friend who had a terrible time with menopause. She experienced huge emotional swings, gained weight, and suffered debilitating hot flashes. After consulting an alternative medicine doctor who advised her to eat lots of soy, she completely changed her diet. She became a vegetarian, replaced meat with tofu and milk with soymilk, and added more fresh vegetables to her meals. Within a few months she had lost weight, all her symptoms had disappeared, and her sex drive had improved tremendously.

Studies show that one valuable resource for women is soy. Soybeans contain phytoestrogens, or plant estrogens, that may help replace the estrogen that

your body is naturally producing less of over time. Japanese women, who eat a diet heavy in soy, have far lower levels of breast cancer and less trouble with menopausal symptoms. A suggestion is to inject more soy into your diet and see what it does for you.

In general, remember that you should eat a diet that is low in fat and high in fresh fruits and vegetables.

4.

Physical problems: Vaginal dryness, a common problem after menopause, can be easily treated with lubricants available at most drugstores and supermarkets. You'll need to apply the lubricant every time you have sex. If you use condoms, avoid Vaseline or other oil-based lubricants as they destroy the condom material. While there is a vast variety available, we specifically recommend these special sex enhancement lubricants:

Water-based sexual lubricants
Silicone-based sexual lubricants

If you find that your vaginal walls have relaxed over time, as do many older women, there is hope. A simple exercise, known as the Kegel exercise, can improve your muscle tone and help you to enjoy sex more. Simply squeeze the muscles around your vagina as if you were trying to stop yourself from urinating midstream. Contract these muscles for one minute, then release. Repeat at least 10 times, and increase the number of repetitions over time. You can do these exercises any time – while you're working at a desk, while driving, or even when you're watching TV.

If connected to Internet **CLICK HERE** to go to the web-site dealing with menopause in-depth

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