

#### Disclosures

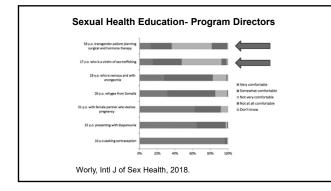
I served as an unpaid speaker for AbbVie, Inc.

### **Mission Statement**

 To innovate and provide expert training for OB/GYN providers and learners, inspiring motivated and effective quality clinical care that results in equitable outcomes, particularly for those with challenging social determinants of health.

	Residency year					Differences
Didactic topic	1st n = 247	2nd n = 205	3rd n = 204	4th n = 146	All years n = 802	groups (P)
Gender issues (LGBTQ) and sexual health	81 (32.8)	106 (51.7)	120 (58.8)	75 (51.3)	382 (47.6)	•
Screening for human sexual trafficking	33 (13.4)	33 (16.1)	41 (20.1)	28 (19.2)	135 (16.8)	
Screening for sexual violence (including domestic and rape)	114 (46.2)	117 (57.1)	136 (66.7)	101 (69.2)	468 (58.4)	
Age related sexual health	99 (40.1)	108 (52.7)	97 (47.6)	77 (52.7)	381(47.5)	
Sexual health for women with disabilities	15 (6.1)	13 (6.3)	16 (7.8)	14 (9.6)	58 (7.2)	
Cultural competence in sexual health (including genital cutting)	42 (17.0)	52 (25.4)	62 (30.4)	46 (31.5)	202 (25.2)	
Therapies for sexual dysfunction	52 (21.1)	70 (34.2)	87 (42.7)	70 (48.0)	279 (34.8)	
Etiologies of sexual dysfunction (desire, arousal, orgasmic, pain)	71 (28.7)	107 (52.2)	127 (62.3)	95 (65.1)	399 (49.8)	•

Sexual Health Education- OB/GYN Residents

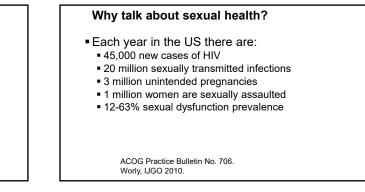


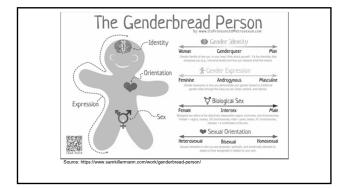
## Objectives

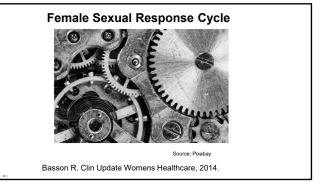
- 1. Be familiar with normal sexual behavior, gender, and sexual orientation.
- 2. Gain proficiency in the categories of sexual dysfunction and treatment options.
- 3. Be prepared to discuss sexual problems and barriers with different age and orientation groups.
- Examine special topics in Human Sexuality:
   Sex trafficking
  - 2. Female genital cutting
  - 3. Sex for patients with disabilities

"Sexual health is a state of physical, emotional, mental and social well-being related to sexuality; it is not merely the absence of disease, dysfunction or infirmity." -World Health Organization Sexual Health, 2002

ource: Pixabay







## **Neurotransmitters and Hormones**

- Dopamine, norepinephrine, serotonininhibitory and excitatory
- Hormones: oxytocin, prolactin, estrogen, androgen, melanocortin
- Acetylcholine → Nitric oxide, free testosterone, and vasoactive intestinal peptide- clitoral vasocongestion
- Orgasm- opiate receptors, serotonin, prolactin, oxytocin

Cacioppo, Sex Med Rev. 2017 https://nida.nih.gov/sites/default/files/worksheetsmod1\_69.pdf

## Objectives

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QUBBR

Source: nida.nih.gov

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## Pause, Think, and Apply: Patient #1

- 54yo G3P3 with h/o cervical cancer, s/p radical hysterectomy, lymph node dissection, pelvic radiation, now with decreased sexual desire for the past 3 years, and pain with sex
- P- Permission
- LI- Limited Information
- SS- Specific suggestions
- IT- Intensive Therapy

Keshavarz, Z. BMC Women's Health, 2021

### Female sexual interest/ arousal disorder

### Female sexual interest

- Lack of/ decrease in 3:
- Interest in sex activity
  Sex thoughts/fantasies
- Initiation/ response
- Excitement/ pleasure
- Interest in response to internal/ external cues
   Genital/ nongenital sensations
- Occurs 75-100% of time
- Distress, >6 months
- Most common- 5.4-21.4%, peaks at 40-60yo
- Inability to complete sexual activity with adequate lubrication that causes distress, > 6 mo
- 5.4-11.4%

Arousal

Associated with anhedonia

Leiblum SR, et al. Menopause 2006 Kalmbach, et al. J Sex Med 2011 Shifren, et al. Obstet Gynecol 2008 DSM V, 2013

## Differential diagnosis for decreased desire

Psychosocial-spiritual

- Relationship issues
- Lack of sex education
- "Sex is wrong"Infidelity
- Psychological disorder
- Addiction
- Body image
- Survivor of sexual violence
- Incontinence
- Infertility

- Medical conditions
   Hypothyroid
   Obesity
- Diabetes

Biologic

- Cancer
- Vascular diseasesMental illness
- Medications
  - Psychiatric meds
  - Hormonal contraception
  - Antihypertensives
  - Opioids/Steroids
- Normal aging

## Sex Therapy

- Sexual skills training (anatomy, communication)
- Cognitive behavioral therapy
- Mindfulness therapy
- Couples therapy

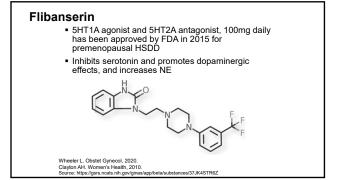
Wheeler L. Obstet Gynecol, 2020.

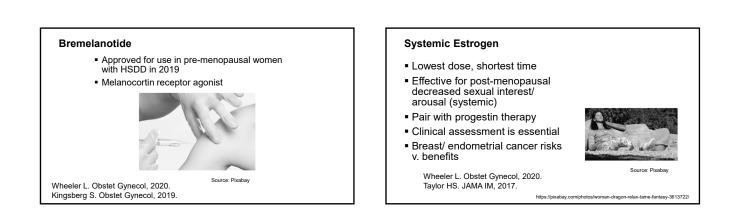
### Buproprion

- Norephinephrine and dopamine agonist
- Small improvement on FSD scale scores
- 150mg twice daily dosing did best in RCT for patients with SSRI-induced sexual dysfunction

Wheeler L. Obstet Gynecol, 2020. Segraves RT. J Clin Psychopharm, 2004.







### Testosterone

 Transdermal patch improves desire, arousal, orgasm frequency, pleasure, satisfaction, and decreases distress in PM women



Wheeler L. Obstet Gynecol, 2020. Simon J. J Clin Endocrin & Metabolism, 2005.

### Summary of Pharmacotherapy for FSIAD

- Buproprion 150-300mg daily
- Flibanserin 100mg daily
- Bremelanotide 1.75mg prn
   Testosterone 300mcg daily (menopause)
- Estrogen (oral) 1-2 mg daily (menopause)

Nurnberg HG, et al. JAMA 2008 Kennedy, J Sex Med, 2010 Seagraves RT et al. J Sex Marital Ther 2001



Source: Pixabay

## Pause, Think, and Apply: Patient #1

- 54yo G3P3 with h/o cervical cancer, s/p radical hysterectomy, lymph node dissection, pelvic radiation, now with decreased sexual desire for the past 3 years, and pain with sex
- What are the next steps?
- A. Sex Therapy
- B. Work on the pain issue to see if desire increases
- C. Estrogen
- D. Testosterone

## Female Orgasmic Disorder

- Delay or absence of orgasm following a normal excitement phase and causes distress, lasting longer than 6 months.
- 75-100% of sexual encounters
- Prevalence of 3.4-8.8%
- 18-41% of 40-81yo women
  latrogenic causes play the biggest role



Author: Thomas Hawk - CC BY-NC 2.0

Levin et al. 2001. http://www.lidu.com/phase/formatives/158858000/hipdotela-bn/Hind2-bash2-bidgDi-bidgDi-al\_Di-al\_pie-al\_pii-al\_

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CC: 24yo G1P1 cis-gendered heterosexual female with moderate depression on fluoxetine, who has never had an orgasm despite regular sexual intercourse for 4 years.

What are possible treatment options?

A. Vibrator

B. See Family Medicine/ Psychiatry to see if fluoxetine can be changed

- C. Take a better sexual history, maybe stimulation has been inadequate
- D. Normalize her experience. Many women do not have orgasms with penetrative vaginal sex
- E. All of the above

#### Genitopelvic pain/penetration disorder

- Dyspareunia- Pain/ fear or anxiety about pain with sex, tightening of pelvic floor
- Vaginismus- recurrent or persistent involuntary spasm of musculature of outer third of vagina with distress, 1-6%
- >6 months, 75-100% of encounters
- 10-15% of women have chronic dyspareunia

Kalmbach, et al. J Sex Med, 2011 Lowman JK, et al. Am J Obstet Gynecol 2008

## **Etiologies of Dyspareunia**

- Vaginal dryness/ Genitourinary syndrome of
- menopause h/o sexual assault/
- abuse
- Endometriosis
- Adenomyosis

## Witzeman, J Pain Res, 2020.

apple A. 2019 (68) - m3d/M/Q -m3d/DE - 24/5a/GD - 2016/2/K - 27/6 HZA - 29/G/KdG - 28/6/2/Kn - 25/17/2/E - 28/2/Kn - 26/2/Kn - 26/2/K

- Uterine fibroids
- Myofascial pain
- Adhesive disease
- Vaginal stenosis
- (radiation)
- Bowel/ bladder etiologies

## **Pelvic Floor Physical Therapy**

- Helpful for dyspareunia related to vaginismus, myofascial pain, vaginal stenosis, laxity, adhesive disease
- Treatments offered:
- Soft-tissue mobilization
- Myofascial release
- Trigger point pressure
- Electric stimulation Vibratory stimulation
- Pelvic floor training
- Biofeedback, bladder/ bowel training
- Home vaginal dilation

## Vaginismus Treatment:

- Systematic desensitization of vagina with graduated dilators
- Emphasis on allowing patient to control pace and duration of sexual activity
- Pelvic floor physical therapy may be done to aid relaxation of pelvic muscles
- Vibration may be helpful
- Topical anesthesia (lidocaine jelly)

Wheeler L. Obstet Gynecol, 2020.

### Genitourinary Syndrome of Menopause (Vulvovaginal atrophy)

- VVA affects 13-87% of postmenopausal women
   More frequent VVA
- More frequent VVA leads to dyspareunia and infrequent intercourse
   Symptoms:
- Symptoms: dyspareunia, vaginal dryness, itching, incontinence



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Mili, Menopause, 2021.

## Vaginal lubricants/ moisturizers

- Hyaluronic-based and polycarbophil products 2-3 times per week
- Coconut, olive, and vegetable oils are less expensive
- Water-based lubricants dry out
- Silicone-based lubricants do not dry out

### Ospemifene

- Ospemifene 60mg daily is an oral estrogen agonist/antagonist, FDA approved 2013
- Female Sexual Arousal Disorder/ Sexual Pain related to moderatesevere dyspareunia due to Vulvovaginal atrophy

Wurtz et al. Clinical Interventions in Aging, 2014. Constantine G. Climacteric, 2015.



Source: Pixabay

Wheeler L. Obstet Gynecol, 2020.

## **Topical/ Systemic Estrogen**

- Lowest dose, shortest time
- Topical is preferred- rings, gels, creams, tablets (minimal systemic absorption) Clinical assessment is essential



 Breast/ endometrial cancer risks v. benefits

Wheeler L. Obstet Gynecol, 2020. Simon JA. Menopause, 2014.

Prasterone

- Prasterone (DHEA) vaginal suppositories for moderate/ severe dyspareunia with vulvovaginal atrophy associated with menopause
- Estrogen is a prasterone metabolite

Archer DF. Menopause, 2015.



CC: 41yo G3P3 postpartum FTSVD 8 months ago, who is a cis-gendered heterosexual female has vaginal dryness with insertional dyspareunia for the past 6 months

What are the first steps of treatment?

- A. OTC vaginal lubricant
- B. Vaginal estrogen
- C. Oral estrogen
- D. Ospemifeme
- E. Prasterone

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	Men (%)	Women (%)
Total	80	65
40-49 years old	93	88
70-80 years old	53	21
Sex more than once per week	44	38

## Sexual dysfunction and age

- Physical changes of aging
  - Cancer/ Incontinence
  - Physical and social environment
  - Education
  - Past experiences
  - Cultural backgroundRelationship
- Physical changes of aging in partner

Ambler et al. Reviews in Obstetrics & Gynecology, 2012. Arthur, J Geriatric Oncol, 2021. Worly, IJGO 2010.

# LBGTQI and health care

- Barriers to care
- Violence
- Psychosocial issues
  - Depression, eating disorders, suicide attempts

ACOG Committee Opinion 525, 2012.

## Transgender care

- 150,000 youth and 1.4 million adults in US
- Gender incongruence- disturbance in sexual or gender identity, distress
- Barriers to care- 54% attempted suicide, 21% resort to selfmutilation
- Possible treatment options:
  - 1. Living in the gender role consistent with identity
  - 2. Cross-sex hormone therapy
  - 3. Gender affirmation surgery

ACOG Committee Opinion, 2021.

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#### Sexual Abuse/ Assault Survivors

- 200,000- 1 million women are survivors of rape per year in US
- Impact on future sexual relationships
- Many feel like they cannot disclose, or are not ready
- Physician-patient relationship of trust and respect can lead to eventual disclosure

ACOG Committee Opinion No. 777, 2019.

## Sex trafficking

- 27 million victims of sexual trafficking worldwide, 27% children, 55% girls
- Crimes of a sexual nature for economic purposes, \$150 billion/year
- 38-62% of prostitutes start as a minor
- Reportable offense for <18yo and >65yo
- National Human Trafficking Hotline



ACOG Committee Opinion 787, 2019.

CC: 18yo G0P0 wearing very expensive clothes, poor personal hygiene, and with recurrent vaginal discharge

The patient has a "translator from home" with her, who answers all questions for her.

What is your next step?

A. Continue with the history and exam with the "translator" in the room

B. Ask the "translator" to leave at an opportune time, and screen the patient for violence/ trafficking

C. Promise the patient that you will keep her safe and call the police

### Female genital mutilation/ cutting

- Clitoridectomy, excision, infibulation
- 200 million girls/ women worldwide, 30 African/ Middle Eastern countries
- Occurs on infants to age 15
- Violation of human rights
- Many complications
  - Immediate: Pain, bleeding, infection, shock, death
  - Long-term: urinary, menstrual, sexual, obstetric psychologic problems
    - - Chappell AG. J Plast Reconstr Aesthet Surg, 2021

#### Sex for patients with disabilities

- Intellectual and physical disabilities are different
- Increased risk of nonconsensual sex acts
- Contraception issues- compliance
- US Eugenics movement, Supreme Court Buck v. Bell 1927
- Decreased education
- Healthcare Power of Attorney issues
- Menstrual hygiene
- STI Screening regularly
- Pregnancy?

Holland-Hall. Pediatr Clin N Am, 2017.

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