

Will menopause affect my sex life?

If your sexual wellbeing is good before menopause, it is likely to remain good after menopause. Although the hormonal changes of menopause can affect some women's sex lives, sexual wellbeing is often a complex issue involving matters that both you and your partner are experiencing.

Changes in your sexual wellbeing might include:

- lack of interest in sex (low libido)
- difficulty becoming aroused
- difficulty having an orgasm
- vaginal pain during intercourse because of vaginal dryness or pelvic floor muscle problems.

Before you assume that changes in hormone levels are causing any issues, it is important to remember that many other factors could also be affecting your sex life. These include:

- feeling less attractive to your partner
- feeling stressed in your personal life –juggling looking after children, parents, finances or your partner
- having little free time to spend with your partner
- having a partner experiencing their own sexual changes
- taking medications affecting sexual function –for example, antidepressants
- having medical conditions affecting sexual function – gynaecological surgery can cause vaginal pain or affect your ability to become aroused.

It is important to look at all aspects of your sexual health and wellbeing.

If you are experiencing problems, a doctor or counsellor will be able to help you explore issues that are affecting your sex life. Your doctor can explain whether hormonal therapies can help your sex life or if you or your partner need some other help such as counselling or referral to a pelvic health physiotherapist for pelvic floor muscle problems.

Vaginal dryness

Many women experience vaginal dryness because of lower oestrogen and this can make sexual activity uncomfortable or painful. This can be a particular problem for women with breast cancer treated with aromatase inhibitors.

Speak with your doctor, as this can be treated with:

- vaginal oestrogen therapy
- non-hormonal vaginal moisturisers
- lubricant during sex.

Testosterone therapy may improve sexual function in some women

Women's bodies naturally make testosterone throughout their lives, although they have only one-tenth of the testosterone level of men. Testosterone levels gradually decrease with age, but do not change dramatically because of menopause unless you have entered menopause because of surgery or chemotherapy.

In women, testosterone is converted to oestrogen and may also be important in sexual function, bone strength, muscle strength and other body functions. Some studies have suggested that testosterone treatment can improve sexual function in some women. However, the safety and effectiveness of testosterone therapy in women with breast cancer is not known.

MAIN POINTS

- **If your sex life is good before menopause, it is likely to remain good after menopause.**
- **Sexual wellbeing is complex and many other personal factors in your life could be involved.**
- **Vaginal dryness can be treated with creams and lubricant.**
- **Hormonal treatments include oestrogen or testosterone therapy but only use testosterone designed for women.**
- **Your doctor, a pelvic health physiotherapist or a counsellor may need to work with you to look at the many factors that might be affecting your sexual wellbeing.**

Oestrogen tablets and sexual function

Oestrogen tablets can cause testosterone in your blood to become less biologically active and so affect your sex life. If your doctor thinks this might be the case, they can try switching you to an oestrogen gel or patch. This can help testosterone in your blood to become more active and improve sexual function.

DHEA

DHEA (dehydroepiandrosterone) is a hormone that your body produces and then converts to testosterone and oestrogen. For this reason, some people think that DHEA supplements can improve sexual function or have an 'anti-ageing' effect. But many studies have failed to find any proof that DHEA can help with menopausal symptoms or sexual function problems except for vaginal dryness. A DHEA vaginal preparation has recently been approved in the USA for vaginal dryness but it is not yet available in Australia/ New Zealand. The Australasian Menopause Society does not recommend other DHEA preparations for women or men.

Where can you find information about treatment options?

If you are worried about your sex life or your symptoms are bothering you, your doctor can help. Your doctor can tell you about the changes in your body and offer options for managing your health and any symptoms. Other AMS fact sheets (www.menopause.org.au) about treatment options include:

- Menopausal Hormone Therapy or Hormone Replacement Therapy (*What is MHT and is it safe?*)
- Non-hormonal treatment options (*Nonhormonal treatments for menopausal symptoms*)
- Lifestyle changes and menopause (*Lifestyle and behaviour changes to manage menopausal symptoms*)

Information for your doctor to read includes AMS Information Sheets:

- *Lifestyle and behaviour modifications for menopausal symptoms*
- *Vulvovaginal symptoms after menopause*
- *Sexual difficulties in the menopause*
- *Vaginal health after breast cancer: a guide for patients*

If you have any concerns or questions about options to manage your menopausal symptoms, visit your doctor or go to the Find an AMS Doctor service on the AMS website.

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