

Anything that prevents pleasure from or ability to maintain sexual activity.

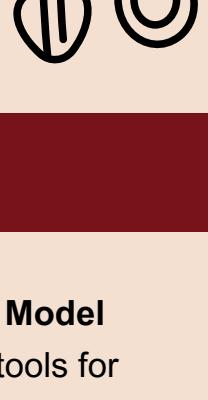
Risk Factors/Pathophysiology

FEMALE	ALL	MALE
<ul style="list-style-type: none"> History of sexual abuse Psychosocial factors <u>Gynecological</u>: menopause, genitourinary syndrome of menopause (GSM), infections, endometriosis <u>Medical conditions</u>: arthritis, hypertension, neuromuscular, neurodegenerative disorders <u>Medications</u>: oral contraceptives, cardiovascular medications, psychotropics (i.e. barbiturates, lithium) 	<ul style="list-style-type: none"> Traumatic sexual experiences Emotional or psychological stress Malignancy and cancer treatment <u>Medical conditions</u>: depression, anxiety, diabetes mellitus, vascular disease (atherosclerosis) <u>Neurological conditions</u>: spinal cord injury, multiple sclerosis <u>Medications</u>: Antidepressants (SSRIs, TCAs), hypertensive medications 	<u>Erectile dysfunction</u> <ul style="list-style-type: none"> <u>Anatomical</u>: micropenis, penile fracture, Peyronie's disease Obesity Smoking <u>Medical conditions</u>: dyslipidemia, metabolic syndrome, Alzheimer's, Parkinson's Antifungal Ketoconazole <u>Premature ejaculation</u> <ul style="list-style-type: none"> Family history Inhibitory serotonergic pathway impairment

Prevalence of sexual dysfunction is higher for

women (43%) than men (31%)

Clinical Presentation

FEMALE	MALE
<u>Hypoactive sexual desire disorder</u>	<u>Erectile dysfunction</u>
<ul style="list-style-type: none"> Lack of motivation/desire for sexual activity 	<ul style="list-style-type: none"> Inability to attain or maintain erection satisfactory for sexual performance
<u>Female sexual arousal disorder</u>	<u>Premature ejaculation</u>
<ul style="list-style-type: none"> Difficult to attain or maintain mental excitement with sexual activity 	<ul style="list-style-type: none"> No control over timing of ejaculation Ejaculation within 1 minute of vaginal penetration Inability to control/delay ejaculation High level of distress with symptoms 
<u>Persistent general arousal disorder</u>	
<ul style="list-style-type: none"> Intrusive, distressing feelings of genital arousal 	
<u>Female orgasm disorders</u>	
<ul style="list-style-type: none"> Distressing compromise of orgasm frequency/intensity/timing/pleasure Aversive symptoms occurring before/during/after orgasm 	
<u>Genito-pelvic pain penetration dysfunction</u>	
<ul style="list-style-type: none"> Difficulties with vaginal penetration Vulvovaginal/pelvic pain during genital contact Fear or anxiety in anticipation of pain Hypertonicity or overactivity of pelvic floor 	

Diagnostics/Screening

- All persons should be regularly screened for sexual dysfunction
- Females** are screened for all types of sexual dysfunction with the **same Four Step Model Diagnostic criteria** screening tool, while **males** have **multiple specific** screening tools for both erectile dysfunction and premature ejaculation

Treatment

Both females and males can benefit from psychosexual therapy

FEMALE	MALE
<u>Hypoactive sexual desire disorder</u>	<u>Erectile dysfunction</u>
<ul style="list-style-type: none"> Selective estrogen receptor modulator, DHEA, androgens 	<ul style="list-style-type: none"> Medications: PDE-5 Inhibitors CVD risk: Cardiac stress testing before treating
<u>Female sexual arousal disorder</u>	<u>Premature ejaculation</u>
<ul style="list-style-type: none"> Bremelanotide, Flibanserin, Bupropion Foreplay, nonpenetrative sexual activity, vibrator use 	<ul style="list-style-type: none"> Medications: SSRI (alone or combined with PDE-5 inhibitor)
<u>Female orgasm disorders</u>	
<ul style="list-style-type: none"> Masturbation instruction, communication/focus exercises, desensitization Personal lubricants, moisturizers 	
<u>Genito-pelvic pain penetration dysfunction</u>	
<ul style="list-style-type: none"> Local estrogen therapy Pelvic floor physical therapy, vaginal dilators, progressive relaxation therapy, desensitization Personal lubricants, moisturizers 	

