



Sexuality and the Older Adult

Part 2: Factors Affecting Sexual Function

Learning Objectives:

- This is a review of issues that affect sexual health besides normal aging.



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Sexual Health & Medical Conditions



Earlier, normal physical changes were discussed. There are a number of medical conditions and life altering situations that, when added to normal changes, can cause sexual dysfunction among older people, including:

- Alcohol
- Arthritis
- Chronic pain
- Continence
- Dementia
- Depression
- Diabetes
- Heart Disease
- HIV & AIDS
- Medications
- Stroke
- Surgery for cancer



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Alcohol

- Alcohol misuse among older adults is sometimes overlooked or even misdiagnosed.
- Substance abuse screenings are an important aspect of understanding an individual's behaviour.
- Causes may include:
 - Empty nest syndrome,
 - Loss of friendships due to moves or health complications or death,
 - Deteriorating health conditions,
 - Traumatic events like a spouse's illness or death,
 - Sadness after downsizing a home, and
 - Boredom from retirement or lack of socialization.
- Too much alcohol can cause erection problems in men and delay orgasm in women.

(NIH 2017)

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Arthritis



- Joint pain due to arthritis can make sexual contact uncomfortable.
- Adapting one's lifestyle and needs is necessary based on arthritis symptoms.
- Exercise, drugs and possibly joint replacement surgery may help relieve this pain.
- Rest, warm baths and changing the position or timing of sexual activity can also be helpful.

(NIH 2017)

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Chronic Pain



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- Pain can interfere with intimacy between older people.
- Chronic pain does not have to be part of growing older and can often be treated.
- Some pain medicines can interfere with sexual function.

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Continenence Problems



(NIH 2017)

- Loss of bladder control or leaking of urine is more common as people, especially women, grow older.
- Extra pressure on the belly during sex can cause loss of urine.
- This can be helped by changing positions or by emptying the bladder before and after sex.

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Dementia and Older Adult Sexuality



- Some people with dementia show increased interest in sex and physical closeness, but they may not be able to judge what is appropriate sexual behavior.
- Those with severe dementia may not recognize their spouse or partner, but they still desire sexual contact and may seek it with someone else.
- Part 4 will discuss sexuality and dementia in more detail.

(NIH 2017)

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Depression and Older Adult Sexuality

- The symptoms of depression vary in frequency and severity for each person. Generally, the more severe depression an individual has, the more problems they likely have with sexual health.
- Sexual desire is cultivated in the brain, and sex organs rely on chemicals in the brain to promote libido as well as the changes in blood flow needed for the sexual act.
 - When depression disrupts these brain chemicals, it can make sexual activity more difficult.
 - This may be worse in older adults who already have occasional problems with sexual dysfunction.
- Treatment for depression itself that may interfere with sexual health, such as antidepressants, the most common forms of medical treatment for depression, can often have unwanted sexual side effects. The most common are:
 - monoamine oxidase inhibitors (MAOIs)
 - serotonin and norepinephrine reuptake inhibitors (SNRIs)
 - selective serotonin reuptake inhibitors (SSRIs)
 - tetracyclic and tricyclic medications

(Legg 2017)

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Diabetes and Older Adult Sexuality

- Diabetes and urological health issues are closely connected.
- Diabetics are prone to urinary tract infections (UTIs), bladder issues and sexual dysfunction.
- Diabetes can often make your urologic conditions even worse because it can impact blood flow, nerves and sensory function in the body.
- Both male and female sexual dysfunction are impacted by diabetes because it impacts nerve and sensory function, as well as blood flow to the genital area. Women with diabetes may have a loss of sensory function or even vaginal dryness, which can cause pain during sex.

[\(Urology Care Foundation 2017\)](#)



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Heart Disease and Older Adult Sexuality

In a study by Huang et al of 2,763 postmenopausal women, the presence of coronary heart disease was significantly associated with:

- Lack of sexual interest,
- Inability to relax during sexual activity,
- Arousal and orgasmic disorders, and
- General discomfort with sex.

Larkin reported on studies that assessed the prevalence of erectile dysfunction (ED).

- Approximately 40% of men are affected by age 40.
- Nearly 70% of men are affected by age 70.
- The prevalence of complete ED increased from 5% by age 40 to 15% by age 70.
- Age was the variable most strongly associated with ED.

[\(Huang 2009 Larkin 2018\)](#)



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HIV/AIDS and Older Adult Sexuality

- A growing number of older people are living with HIV/AIDS
 - Nearly half of people living with HIV in the United States are age 50 and older.
 - Many of them were diagnosed with HIV in their younger years.
 - However, thousands of older people get HIV every year.
 - Although improved treatments are helping people with the disease live longer.
- Older people are less likely than younger people to get tested, so they may not know they have HIV.
 - Older adults may be coping with other diseases and the aches and pains of normal aging that can mask the signs of HIV/AIDS.
- Some older people may feel ashamed or afraid of being tested.
 - Health Care Providers do not always think to test older people for HIV.
 - By the time the older person is diagnosed, the virus may be in the late stages and more likely to progress to AIDS.

(NIA 2017)

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Medication and Older Adult Sexuality

- Some drugs can cause sexual problems.
- These include:
 - Blood pressure medicines
 - Antihistamines
 - Antidepressants
 - Tranquilizers
 - Parkinson's disease
 - Psychiatric treatment medicines
 - Cancer medications
 - Appetite suppressants
 - Ulcer treatment medicines
- Some drugs can lead to ED or make it hard for men to ejaculate.
- Some drugs can reduce a woman's sexual desire, cause vaginal dryness or difficulty with arousal and orgasm.

(NIH 2017)

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Surgery and Older Adult Sexuality

These 3 main surgeries cause women, men and their partners stress regarding sexual activity:

- Hysterectomy (removing a woman's uterus) because of pain, bleeding, fibroids, or other reasons.
 - Often, when an older woman has a hysterectomy, the ovaries are also removed. This surgery can leave women and their partners worried about their future sex life.
- Mastectomy (remove all or part of a woman's breast) because of breast cancer.
 - This surgery may cause some women to lose their sexual interest, or it may leave them feeling less desirable or attractive to their partners.
- Prostatectomy (surgery that removes all or part of a man's prostate) because of cancer or an enlarged prostate.
 - It may cause urinary incontinence or ED.

[\(NIH 2017\)](#)

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