

Sexual Dysfunction

How to manage symptoms



This is not an easy topic to discuss, but it is necessary and can be valuable as these problems may affect you. Once again, not everyone with PD will experience sexual dysfunction, and if you do, it may come in many different forms. These problems can be embarrassing and frustrating and may make you feel like you are negatively impacting your partner's quality of life as well. It is important to talk to your partner about these concerns, even if it's uncomfortable. There are things you can do or take that may make the situation easier for both of you. Remember that you are going to have good days and bad days, and intimacy with your partner can take many different forms.

From a non-motor symptom perspective, sexual dysfunction occurs in both men and women. For men, erectile dysfunction (ED) is the most common sexual issue. For women it is vaginal dryness; while both sexes may experience orgasm difficulties and low libidos.

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So why does this happen? Much like your bladder, sexual responses are an involuntary activity coordinated by your autonomic nervous system. When autonomic dysfunction occurs these functions (erections, bodily secretions, orgasms, and libido) can be negatively impacted.

Erections

The science/facts: In order to achieve erection, healthy nerve pathways and blood flow to the penis is necessary.

What happens when there is autonomic dysfunction: Erectile dysfunction occurs when the nerve function and/or circulation to the penis is compromised. When this happens, men experience a difficulty in achieving and/or maintaining an erection.

What can you do about it: Your treating physician may prescribe medications (oral or injectable) for erectile dysfunction or refer you to another specialist such as a urologist for help managing erectile dysfunction. A vacuum pump device may be an option for men who do not want to or are unable to take ED medication; be sure to speak with your physician to discuss whether this treatment option is right for you. A surgical option may be available (penile prosthesis implant) as a last resort.

Bodily Secretions

The science/facts: The main function of a man's prostate gland is to secrete a fluid that makes up approximately 70% of one's semen; in women, the Bartholin glands inside the vagina help lubricate to prevent excessive dryness.

What happens when there is autonomic dysfunction: The body's natural ability to stimulate these secretions is negatively affected by autonomic dysfunction. Vaginal dryness can lead to significant pain during intercourse and also may result in bladder infections.

What can you do about it: There are many over the counter lubricants that can be applied to reduce dryness and discomfort; these should be water-based and not contain scents or artificial colours. Your pharmacist can help you choose the right one. In some cases, your physician may prescribe hormone replacement therapy.

Orgasm

The science/facts: In describing orgasms as it relates to non-motor symptoms, orgasm happens when the genital and pelvic muscles experience rhythmic contractions approximately 0.8 seconds apart for on average from 10 to 30 seconds. It is important to note that orgasm does not occur for everyone

What happens when there is autonomic dysfunction: Orgasm difficulties can occur when the nerve function to the genitals and pelvic muscles are compromised.

What can you do about it: Sometimes addressing the physical issues of erectile dysfunction and/or vaginal dryness make it easier to achieve orgasm. Having an honest discussion with your treating physician, clinic nurse or a clinical sex therapist will also be helpful.

Libido

The science/facts: The parasympathetic nervous system is directly involved in the process of sexual arousal.

What happens when there is autonomic dysfunction: Issues with a low libido/sex drive can occur when nerve function is compromised. *It is important to note however that there are many other factors in Parkinson disease that can contribute to a diminished libido (see below).*

What can you do about it: It is best to speak to your treating physician about this issue as it may be that it is one of the other contributing factors causing your low libido, and not autonomic dysfunction.

Other factors that may cause sexual problems for a person with Parkinson disease include, but are not limited to: decreased dopamine levels, some Parkinson's medications, other physical difficulties in Parkinson's such as rigidity and pain, depression, anger and grief, stress, problems with body image or self-esteem, and disease-related fatigue. Parkinson's may also affect your partner's sexuality as well.

Over HALF of people with Parkinson's report that their sexual life and desire has been negatively impacted by the disease. Unfortunately, because of the aforementioned reasons (embarrassment, lack of knowledge, etc), many people do not raise these issues with their neurologist or doctor. This under-reporting also means that research into sexual dysfunction and Parkinson's is not as complete; with

current research suggesting that sexual dysfunction is prevalent in the broad range of 37-65% of people with Parkinson disease¹.

Intimacy and a healthy sex life are an important part of human connection and relationships, regardless of illness or aging. If this is something you or your loved one is struggling with it is important to not only talk to each other, but to ask for help from a medical professional as there are many things that can be done to maintain intimacy and a healthy sex life.

References

¹ Bronner G, Royter V, Korczyn AD, Giladi N: Sexual dysfunction in Parkinson's disease. J Sex Marital Ther 2004;30:95-105