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How will pregnancy affect my sex life?

Answers to patients' most common sex and pregnancy questions

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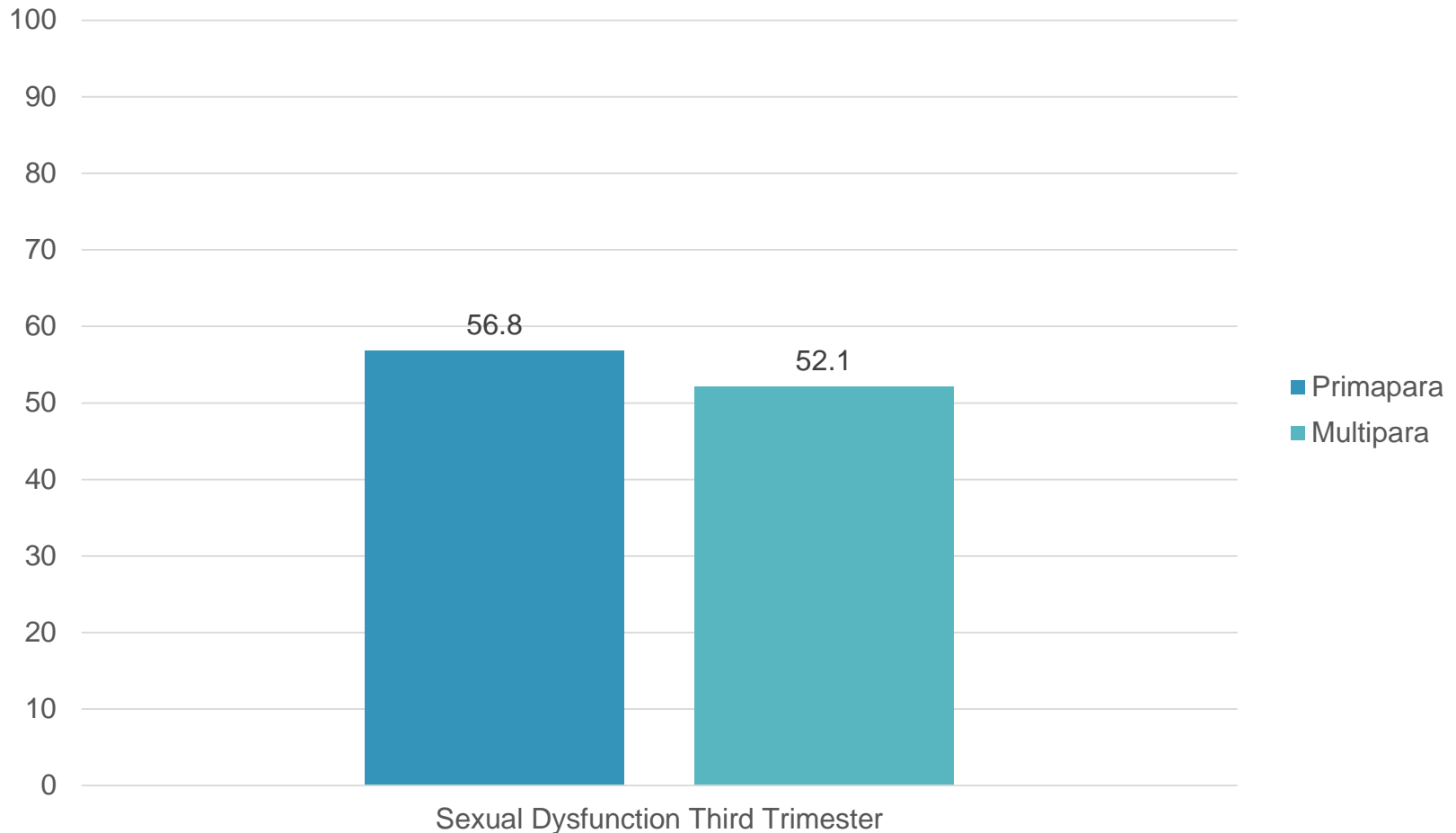
At most, only 1/3rd of women receive sexual health information from their provider during pregnancy

**76% who didn't discuss sexual health,
wanted to**

Common Sex and Pregnancy Questions

1. How will pregnancy affect my sexual function?
2. How will pregnancy affect my sexual relationship?
3. What are the best sex positions to be more comfortable?
4. Is there anything I shouldn't do sexually while pregnant?
5. When will my sex life be back to normal?

How will pregnancy affect my sexual function?

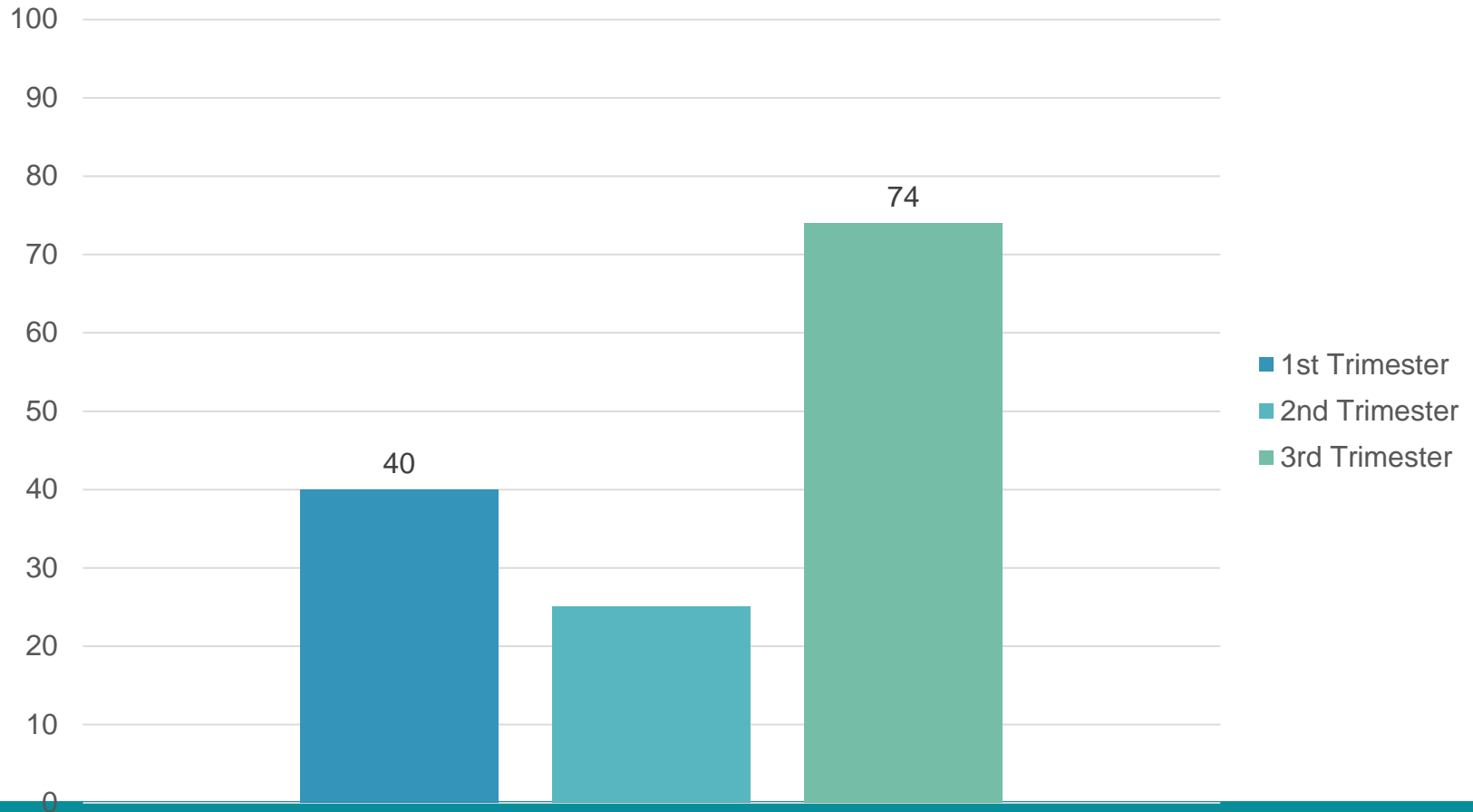


How will pregnancy affect my sexual function?

- Highest percentage of sexual dysfunction is in third trimester
- Biggest increase in sexual dysfunction happens for primipara between 2nd and 3rd trimester
- Sexual dysfunction is “normal” during pregnancy

How will pregnancy affect sexual desire?

Low Sexual Desire

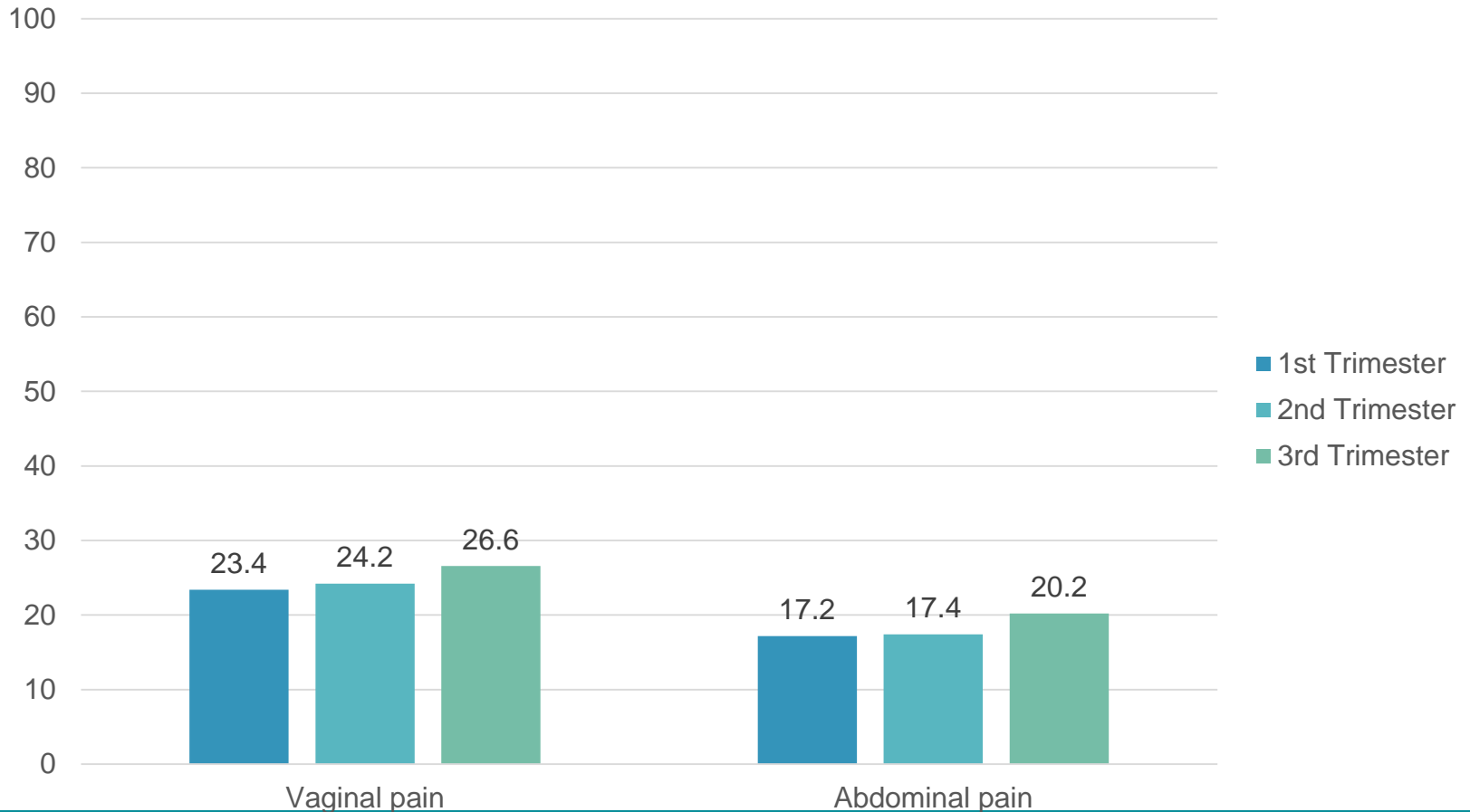


How will pregnancy affect sexual desire?

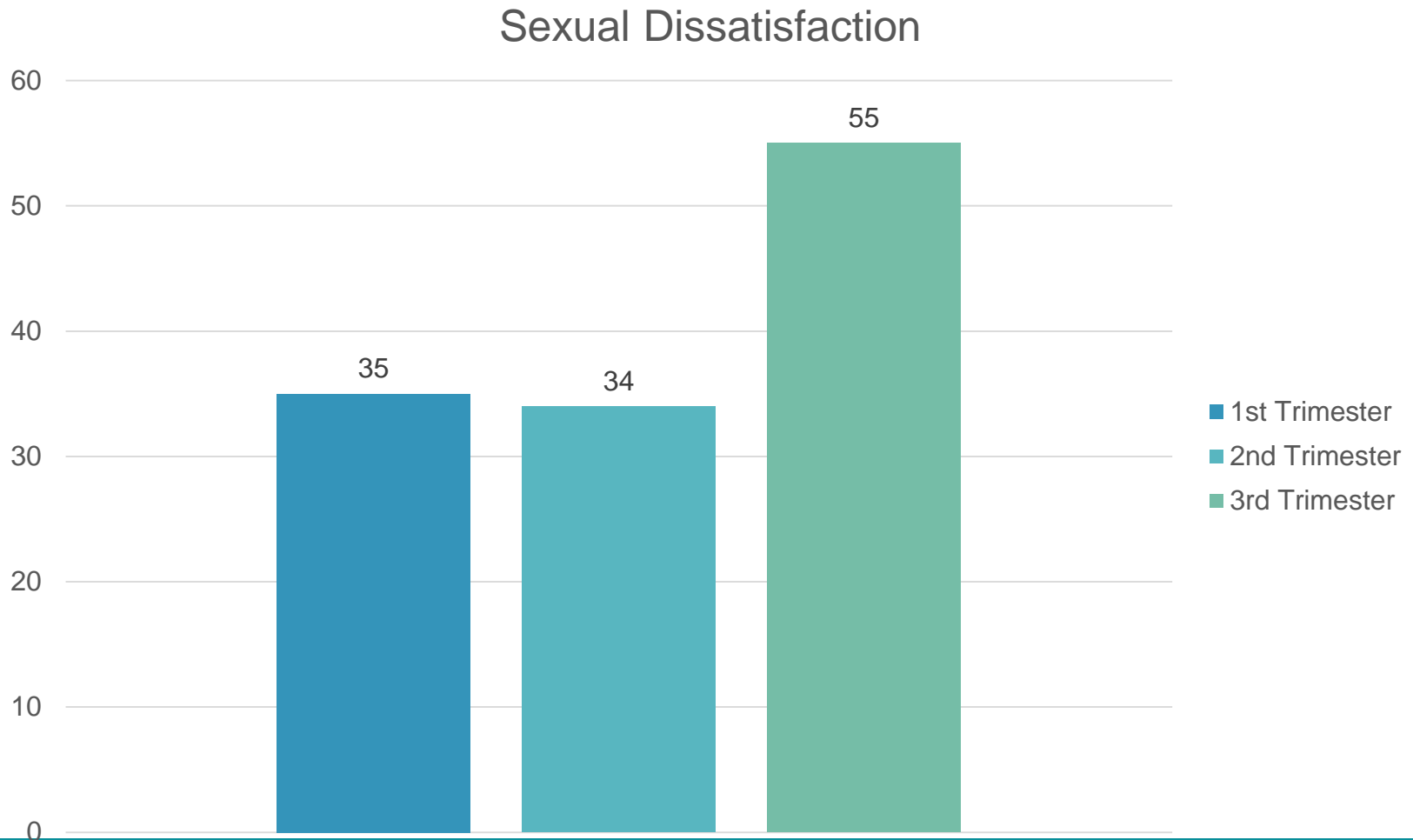
- 2nd trimester:
 - Greater self confidence
 - Better mood
 - Acceptance of pregnancy
 - Greater emotional support from partner
- 3rd trimester:
 - Body changes
 - Fears of well-being of the fetus
 - Partner reluctance

How will pregnancy affect sexual pain?

Pain Interfering with Sex



How will pregnancy affect sexual satisfaction?



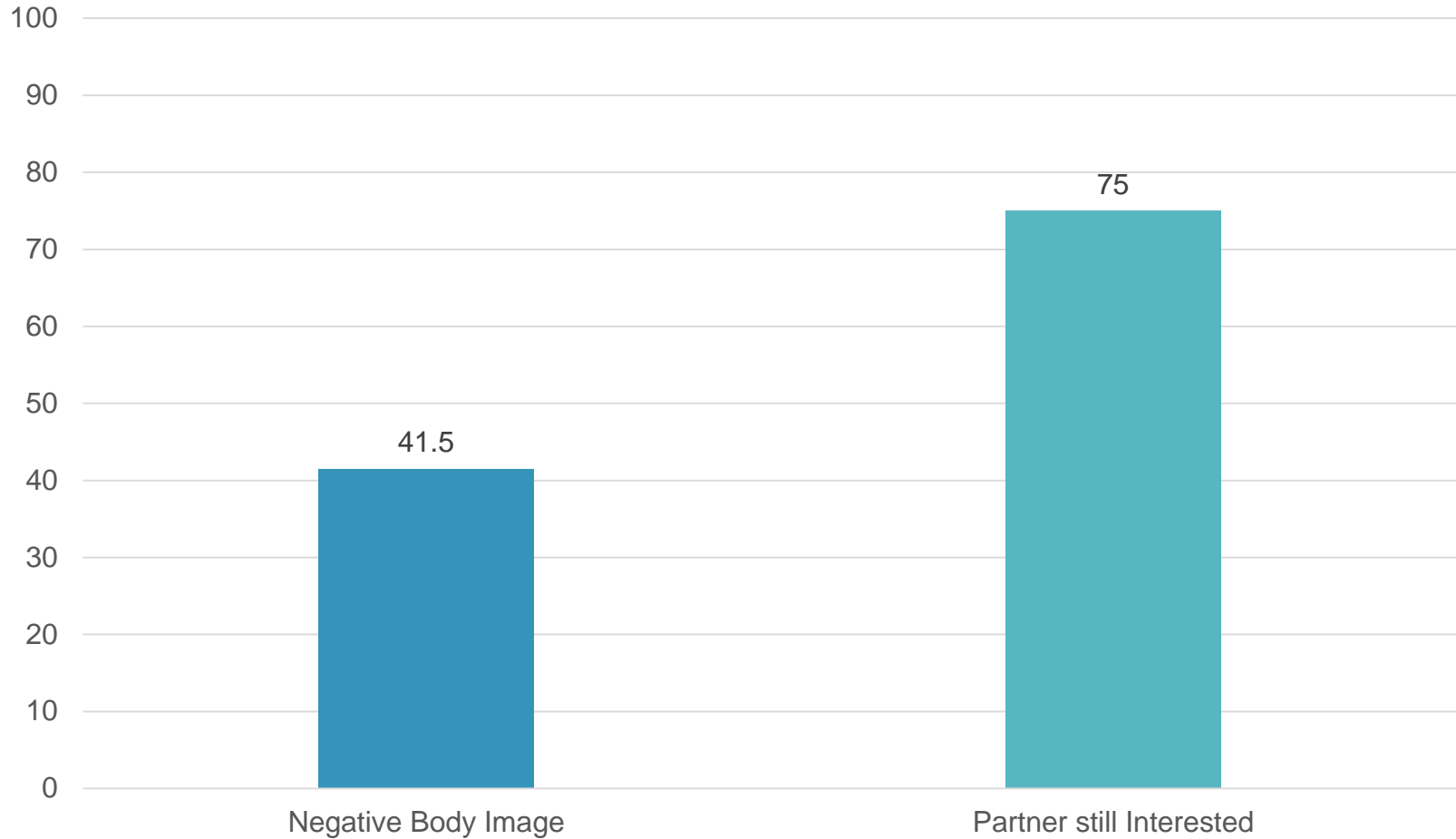
Sexual Function Take Home

1. How will pregnancy affect my sexual function?
 - Over 50% of women have sexual dysfunction by 3rd trimester
 - All aspects of sexual function worst in 3rd trimester
 - Desire better in 2nd trimester

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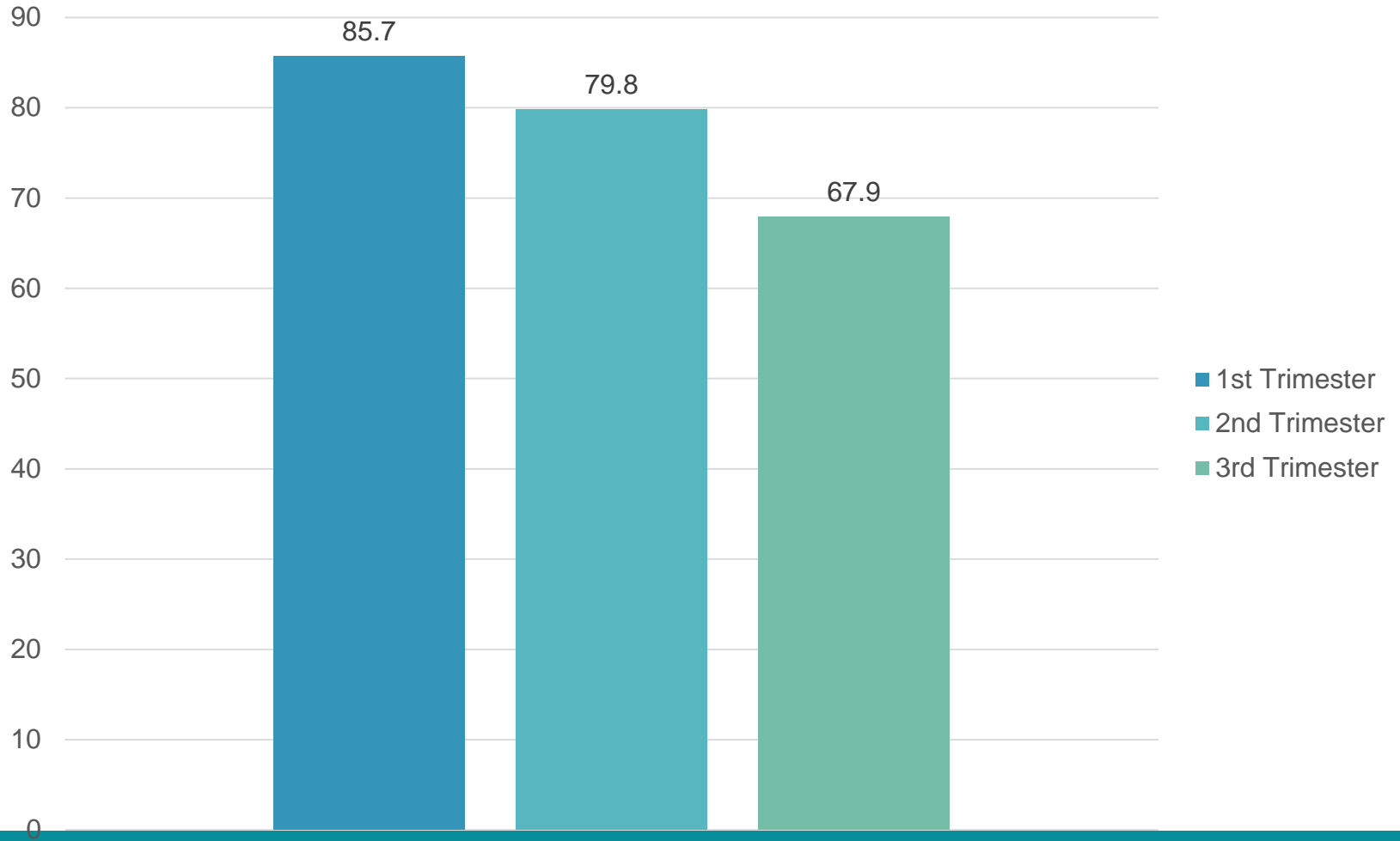
How will pregnancy affect sexual relationship?



How will pregnancy affect sexual relationship?

- Partner's preferred sex doesn't decline, woman-centered sex declines
- Most women want to satisfy their partner's sexual desires.

Women's want to satisfy partner's desire



How will pregnancy affect sexual frequency?

- Primipara: frequency decreases
- Multipara: no major change
 - Vaginal penetration reduces in latter of 3rd trimester
- Fear of harming the fetus is the best predictor of sexual frequency
- Little to no change in non-coital sexual behaviors
 - Decrease in nipple sensation
 - Decrease in clitoral sensation

Sexual Relationship Take Home

2. How will pregnancy affect my sexual relationship?

- Despite over 40% of women having a negative body image, partners' don't feel the same
- Women are highly motivated to satisfy partner's sexual desires
- Partner's preferred sex doesn't decline
- Coital frequency decreases for primipara, not multipara
- No change in non-coital frequency

What are the best sex positions to be more comfortable?

- Positions that take pressure off uterus
- Communicate with your partner!
- Do NOT have painful sex
- Use sexual furniture (cushions, wedges, pillows)
 - <http://www.ergoerotics.com/>
- Lots of different websites with illustrations
 - <https://www.womenshealthmag.com>
 - <https://www.babycenter.com>
- Use sexual accessories

www.lelo.com



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What are the best sex positions to be more comfortable?

- Doesn't have to be about sex! Sensual and intimate activities are a great alternative
 - Body brushing
 - Massage
 - Showering
 - Combing each other's hair
 - Cuddling/snuggling/spooning



Sexual Positions Take Home

3. What are the best sexual positions to be more comfortable?

- Take pressure off of uterus
- Use sexual furniture
- Use sexual accessories
- No painful sex!
- Communicate, communicate, communicate
- Sensual activities are a great alternative

Common Sex and Pregnancy Questions

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Anything I shouldn't do sexually while pregnant?

- Avoid lying on back for extended period of time
 - Decrease blood pressure
 - Compress vessels that deliver blood to baby
- No sex if: bleeding, premature labor, placenta previa
- Oral sex: safe, but avoid blowing air into vagina which could (in very rare cases) cause an air embolism
- Anal sex: likely not safe. Exacerbate hemorrhoids, transfer infections, increase risk of STIs
- Vibrator: safe; silicone, clean with soap and water

Many sexual accessories are toxic

- No regulations on sexual aids
 - “sold as novelty only”
- Many toys made with phthalates
 - “possible human carcinogens”
- Max use = 1 hour per day
 - Unless pregnant or nursing (15 min/week)



EPA, <http://www.epa.gov/oppt/existingchemicals/pubs/actionplans/phthalates.html> (2015)

Sexual Safety Take Home

4. Is there anything I shouldn't do while pregnant?

- Avoid lying on back for extended period
- No vaginal penetration if pregnancy risks
- Don't blow air in vagina
- No anal sex
- Only silicone vibrator, clean with soap & water

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When will my sex life be back to normal?

- Resumption of vaginal intercourse between 6-8 weeks
 - 78-90% resumed by 12 weeks
- No instrumental assistance, episiotomy, sutured perineal tear = 4.5-6 weeks quicker resumption of sexual activity
- 32-62% experienced dyspareunia at resumption
 - Substantially decreased by 6 months
- Sexual function/frequency does not return to baseline for a full year

Most providers don't discuss
sex and pregnancy

Don't be one of those providers

Take Home: Essential sex and pregnancy education for your patients

- Sexual dysfunction is common (over half of women)
 - Low sexual desire
 - Sexual pain (do not have painful sex)
 - Decreased breast/clitoral sensation
- Sexual dysfunction will be at its worst by 3rd trimester
- Maintain intimacy with communication, broad sexual/sensual menu, sexual accoutrements
- After a year, sexual function should return to baseline

JR

THANK YOU!

Any questions?

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