

## More Options Available For Women Experiencing Sexual Dysfunction

by Laura Mackie, M.D.

(NAPSA)—I'm sure the top three concerns among my female patients don't vary much from patients of other OB/GYN practices around the country.

What's most on their minds?



Dr. Mackie

Fatigue, weight gain and decreased libido, or sexual drive. Fatigue and weight gain have been popular patient concerns, but not until recently have the

lack of sexual drive and response also been key issues for them.

When Viagra was introduced in 1998, it sparked discussions about sexual dysfunction—a topic that traditionally didn't get much attention or talk time.

But it's no longer among the list of taboo subjects.

My colleagues and I have received more inquiries about decreased libido from our female patients, and they want to know help exists. These patients are relieved to know they're not alone in feeling a lack of interest or response to sex. This concern typically exists among women ages 30 and over.

According to *The Journal of the American Medical Association*, more than 40 percent of American women experience sexual dysfunction, compared to approximately 30

percent of men. Female sexual dysfunction (FSD) is described as the lack of desire to become intimate, inability to have or enjoy satisfactory sexual intercourse or difficulty in reaching orgasm—all of which can be attributed to child rearing, career stress, age or other factors.

FSD can be difficult to diagnose and treat. When a woman expresses to her physician a decreased interest in sex, it's important the physician obtain her medical history. Is the problem possibly psychological or physiological? Is the woman on medications that can affect sexual desire or response? Anti-depressants can diminish libido, lubrication and arousal. Other causes may include hormonal changes. As women age, their sex hormones, such as estrogen and testosterone, decrease. Some women experience diminished sexual desire and arousal following menopause or hysterectomy as a result of reduced estrogen.

Often, a lack of interest or response to sex is simply a matter of one or both partners failing to communicate their needs to one another.

Whatever the reason, men and women need to feel comfortable discussing their diminished libido with each other and with their physician. Counseling or sex therapy has helped many battling this issue. While men have Viagra and

other prescription options, many of my female patients are also pleased to know there are over-the-counter topical creams and gels that can help with some physical issues related to sexual arousal or response.

One of the first products available through traditional retail drugstores (such as Walgreens) is femoré, a drug- and hormone-free topical cream derived from ingredients designed to help women achieve greater intensity and pleasure during intimate moments. Applied to the woman's genital area just minutes prior to sexual activity, the cream can help women achieve greater intensity and pleasure. Usage and efficacy studies showed that response times vary with each individual woman, who also report improved responses after two or more successive uses.

Women need to remember that these types of products are tools to help boost their physical response to intimacy. These products aren't quick fixes for a woman battling depression or who might be unhappy with her husband. Counseling and sex therapy can be effective options to help with emotional obstacles that may contribute to sexual dissatisfaction or dysfunction.

For more information on female sexual dysfunction and dissatisfaction, visit femore.com.