

Factors affecting the sexual function of postmenopausal women

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Abstract Women spend more than 1/3 of their life in menopause. These neuroendocrine changes affect women's physical and mental health. Sexual health is the most important aspect of health, self-esteem and quality of life. Sexual satisfaction leads to improved marital relationships. Sexual activity can be affected by various factors such as aging, menopause, etc. Women's sex life is strongly influenced by menopause. Menopause causes changes in sexual function and sexual problems. (Abstract)

SEARCH METHOD

Articles indexed were used in pubmed, google scholar, scopus, civilica databases. The collection of articles reviewed was 80 articles that were researched in the last 5 years. Studies whose full text was not available were excluded from the study process.

RESULTS

In obese and overweight postmenopausal women, dysfunction in desire and arousal is higher and sexual satisfaction is lower than women of normal weight (1). Sexual dysfunction is more common in women with increasing menopause (2).

Satisfaction with past sexual experiences, family structure, economic status and education, having an intimate sexual partner and physical health have been the most important determinants of sexual health in postmenopausal women (3-5).

Adding low-dose testosterone gel to daily estrogen may improve sexual function in postmenopausal women (6). Postmenopausal women with pelvic floor muscle dysfunction (PFM¹) have weaker sexual function than other women (7, 8).

Higher fasting glucose levels were significantly associated with female sexual function, in other words, sexual dysfunction is more common in postmenopausal women with metabolic syndrome (9). HSDD² is higher in postmenopausal women with MS than in women without MS³ (10). Depression may affect women's sexuality, while sexual problems can exacerbate depression (11-13). Symptoms of insomnia were

associated with poor sexual arousal, orgasmic dysfunction, and sexual dissatisfaction. Postmenopausal women with chronic insomnia confirm high levels of sexual distress (14).

CONCLUSION

Sex education programs, Kegel exercises, diet, attention to mood and insomnia problems in women can improve some areas of sexual function - especially arousal, orgasm and satisfaction in postmenopausal women.

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¹ pelvic floor muscle

² hypoactive sexual desire disorder

³ multiple sclerosis