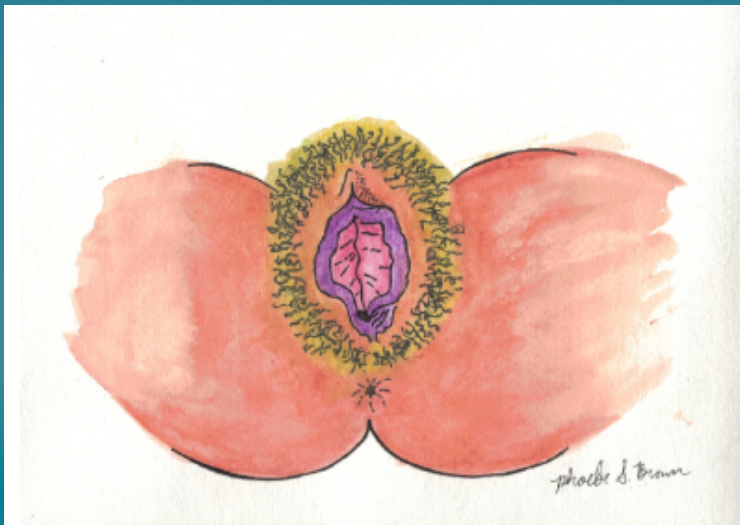


# Cornerstones of Sexual Health



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Envision Sexual and Reproductive Health

Envisionsrh.com

*patty@envisionsrh.com*

# Objectives

- Describe the clitoral complex
- List three (3) cornerstones to sexual health

# Why Don't We Talk about Sexuality?

Lack of training

Cultural stereotyping

Embarrassment

Insurance reimbursement

Lack of time

Does not expect help

The issue is a part of aging, illness

Belief that the patient does not want to discuss it

“older women don't care about sex”

Age spread between patient and provider

Shame

Feels body disgust following mastectomy, colostomy

“Provider will say it's in my head”

Gender discordance

“Teens should not have sex”

Belief that the provider does not want to discuss it

# Times When Sexuality Often Needs Extra Support

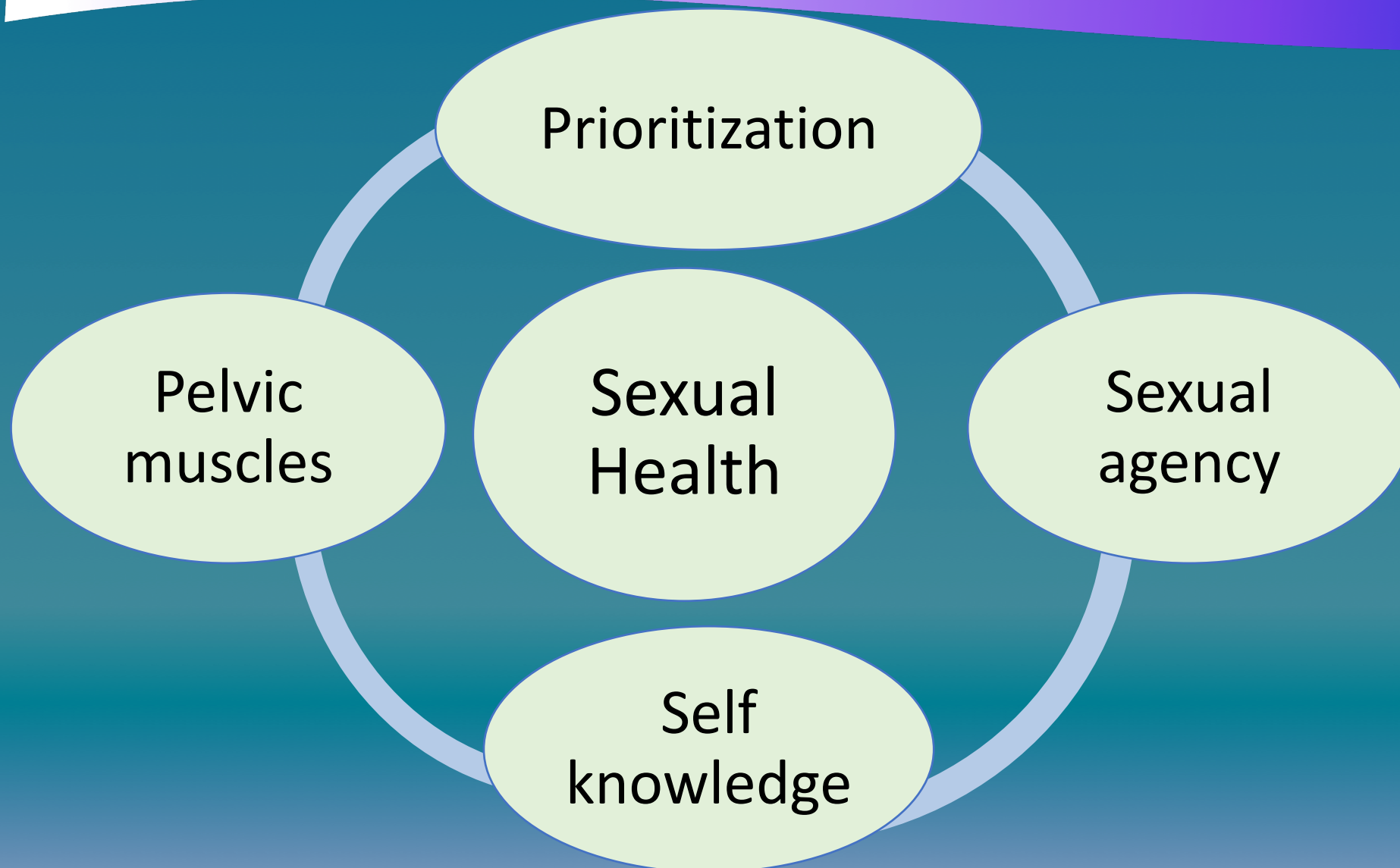
- Adolescence
- Postpartum
- Post op; particularly breast or gyn surgery
- Patients with medical issues; on medication, cancer
- Infertility
- Major life events; financial, death, relationship
- Perimenopause/Menopause

ASK--Offer Help

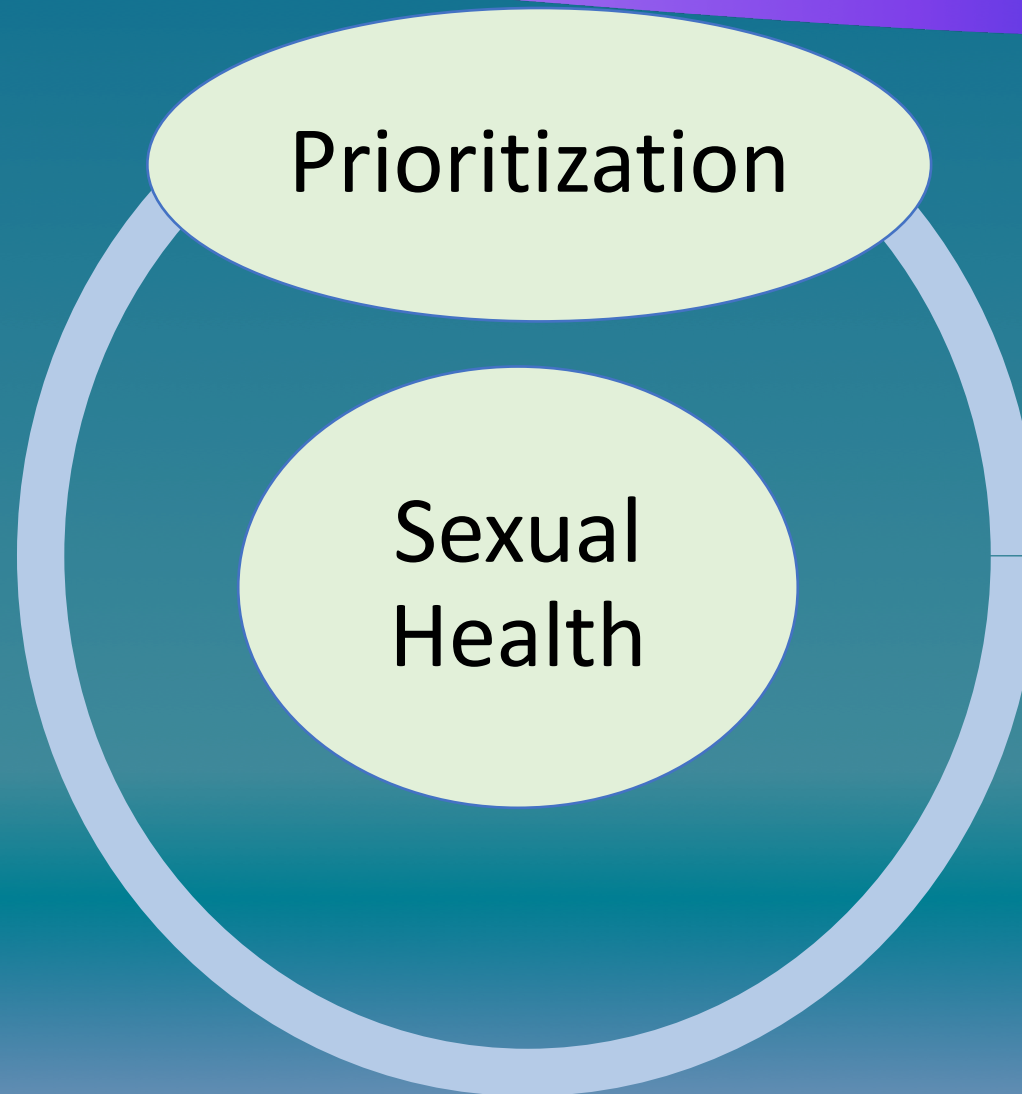
# Is it a Disorder? DSM-5

- Is the individual distressed by their behavior or interest?
- Does a particular behavior put the person or the partner(s) at risk?
- In what way, and is that risk one they understand and are willing to take?
- Is anyone else harmed by the behavior?

# Cornerstones of Sexual Health



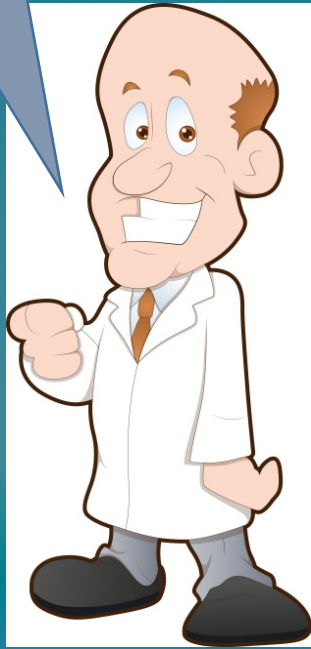
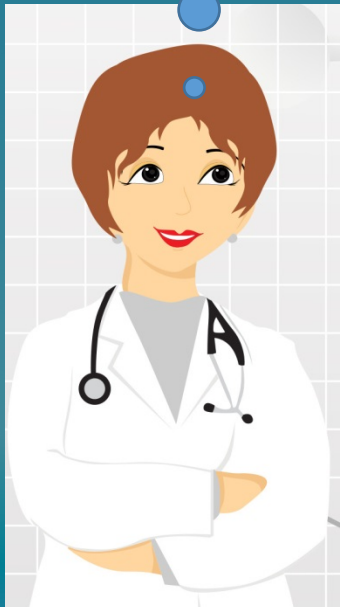
# Cornerstones of Sexual Health



...Sex is  
*really*  
bad!

- Sexually transmitted infections
- Unintended pregnancy
- Intimate partner violence

*"It's better  
just to avoid  
having sex"*



# Having Satisfying Sex:

- Is good for relationships
- Makes people happier
- Supports immune function
- Alleviates menstrual cramps
- Decreases stress and insomnia
- Improves headaches
- Keeps vaginal tissue “plush”

# Orgasmic Sex:

- Extends lifespan
- Is excellent for cardiovascular health
  - no increase in risk of strokes
  - protection from fatal coronary events
- Frequent orgasm is protective against mortality for females

# “Sex Positive” Attitude

- Appreciation that sex is a healthy activity
- Good sex increases libido
- Prioritization of consistent sexual practice



Cornerstone to Sexual Health

# How often?

## How often should you eat, sleep or exercise?

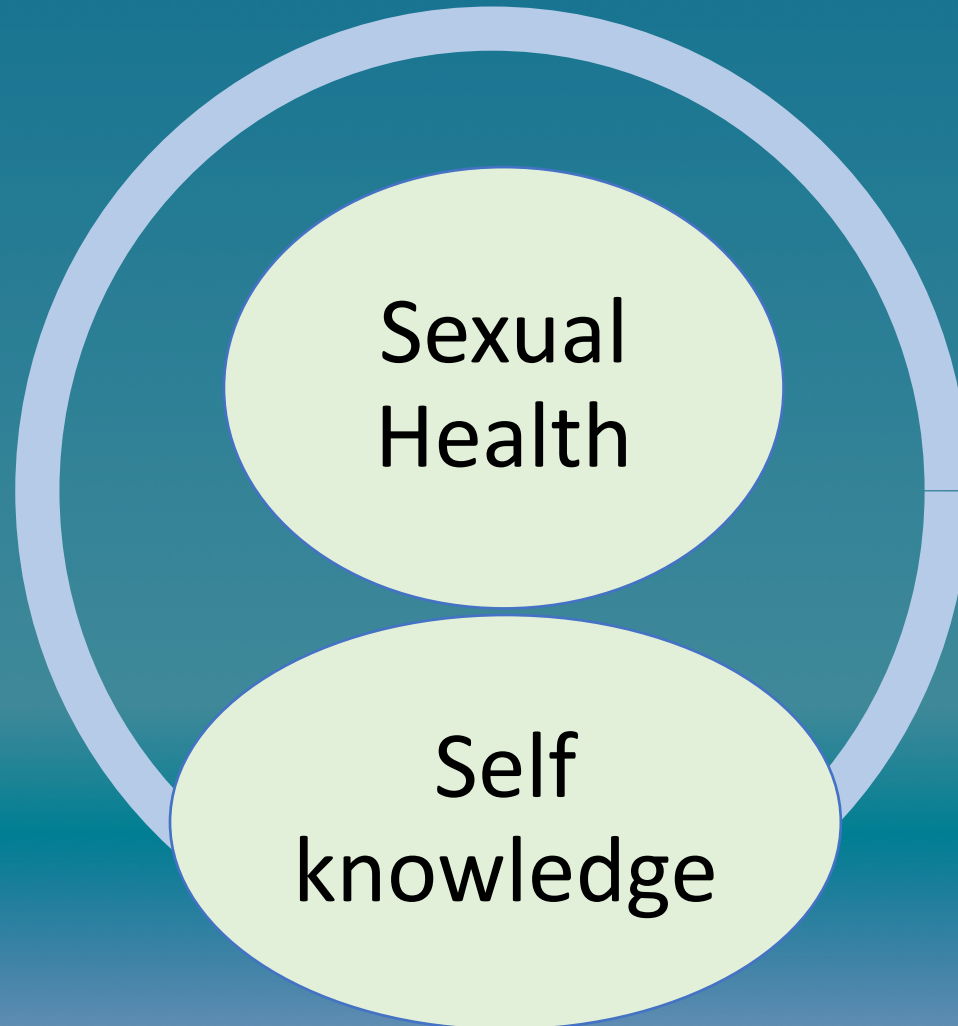
Whatever the baseline, increasing to more frequent orgasmic sex is beneficial



*An orgasm a  
day keeps the  
doctor away*



# Cornerstones to Sexual Health



# Self Knowledge

- Awareness of subjective erotic and sexual sensations
- Fluency in the language of one's own arousal

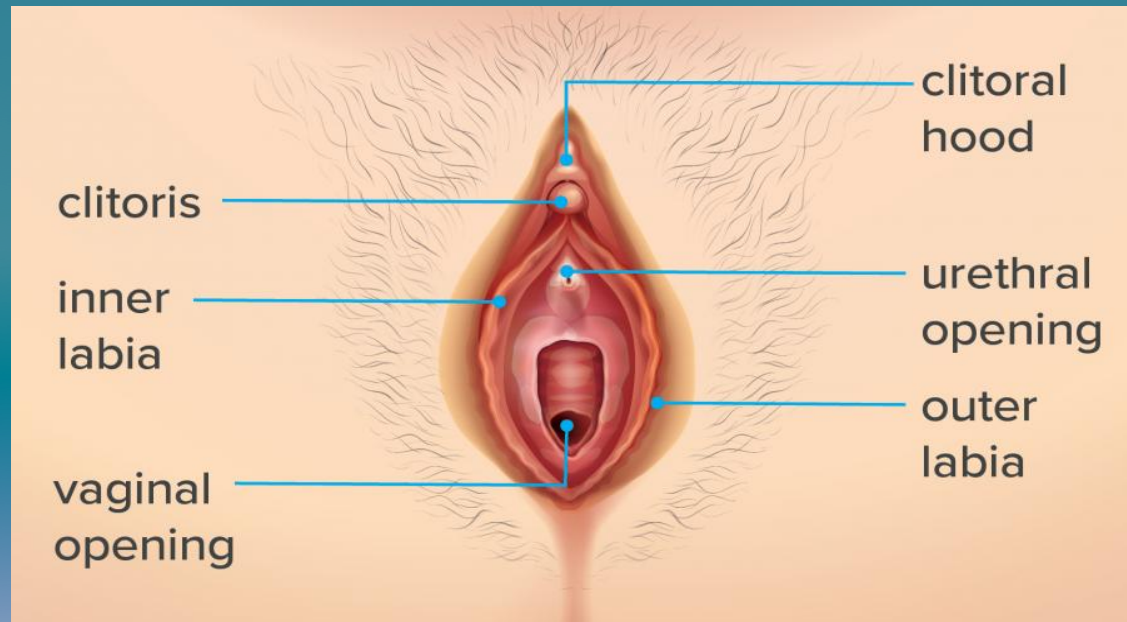
Cornerstone to Sexual Health



Gus's journey of self-discovery...

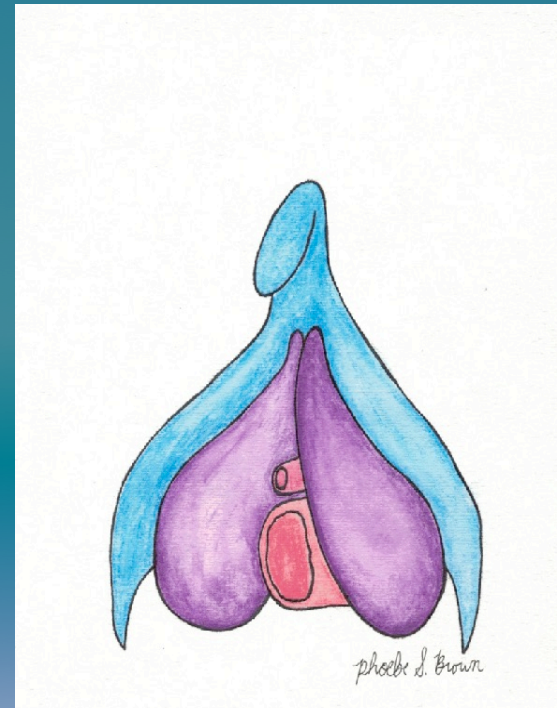
# Ask Yourself:

## Is this the clitoris?



# Ask Yourself

- Is this the clitoris?



## Erect Penis

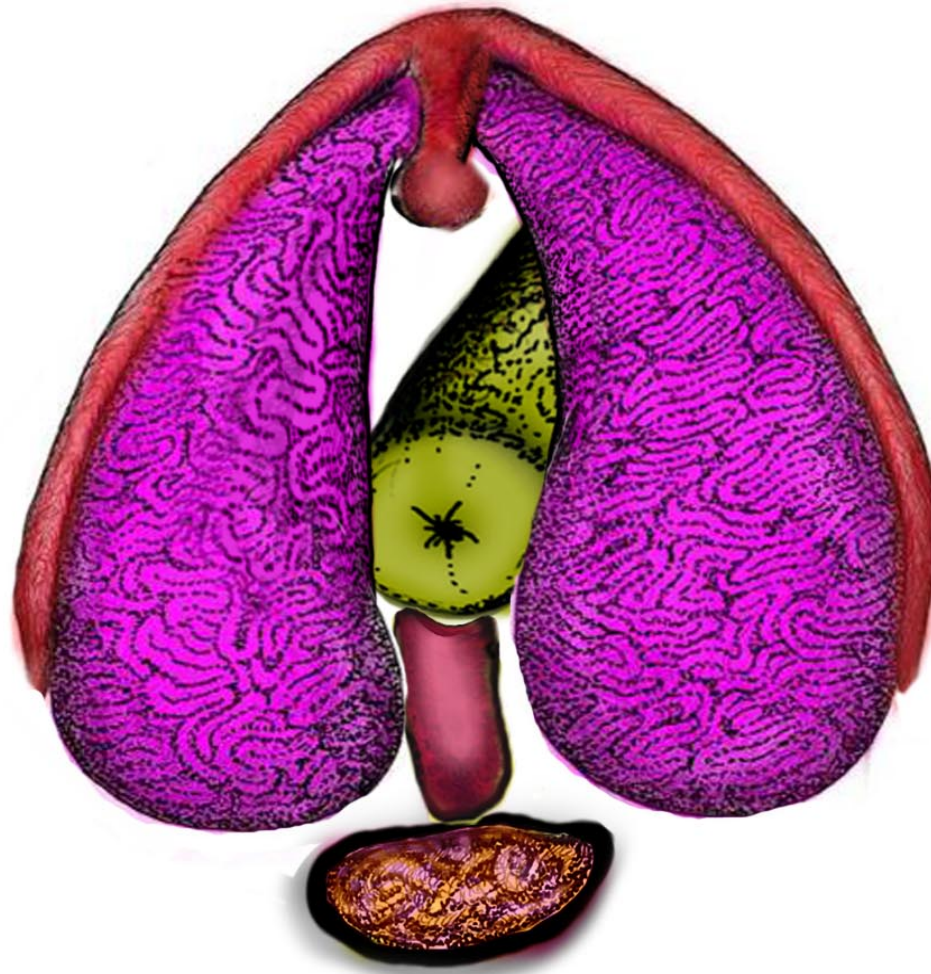
Range: 4 to 26 cm  
(1.5-10.2")

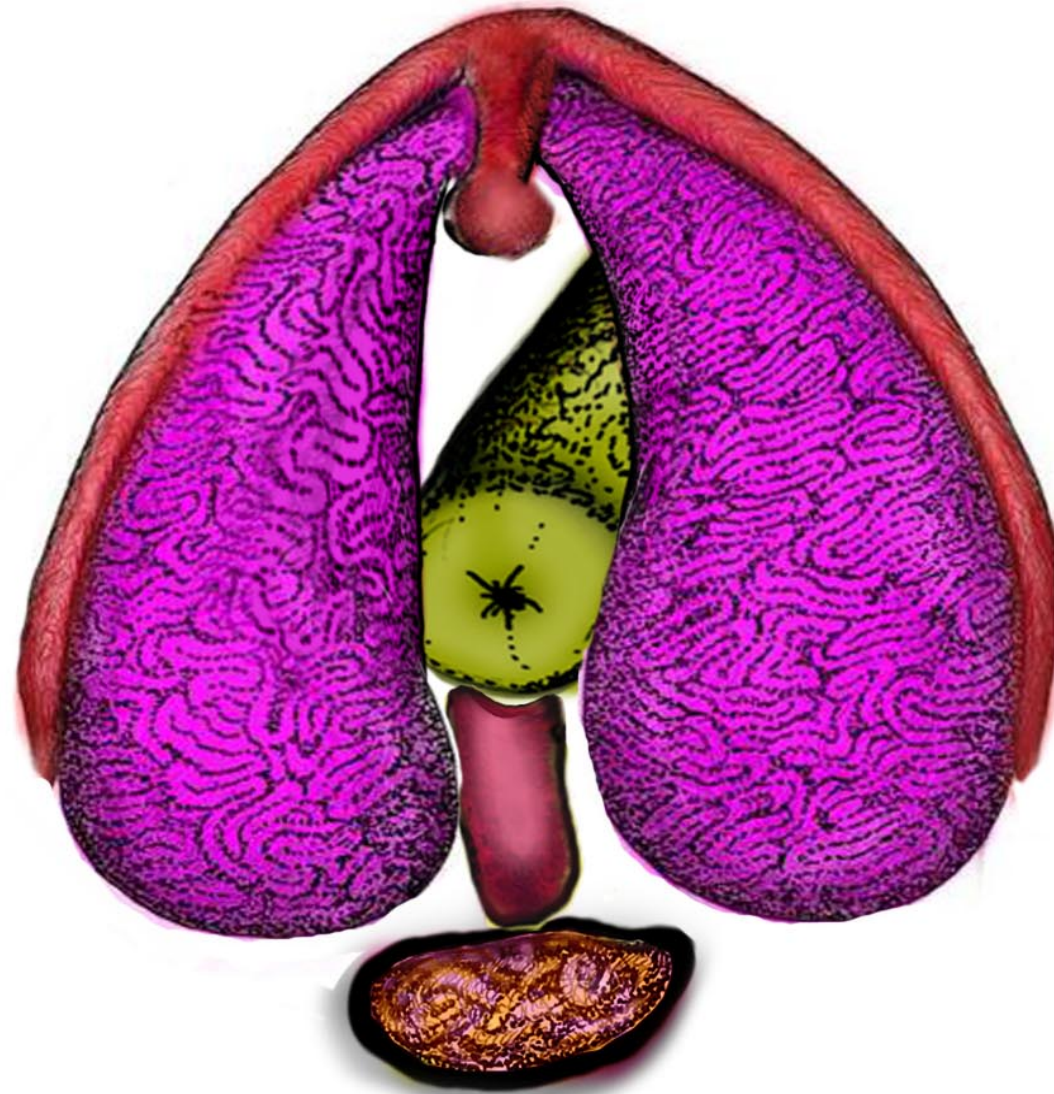
- Mean length:  
14.15 cm (5.57")
- Mean  
circumference:  
12.23 cm (4.81")

## Erect Clitoris

Range of total: 10-20 cm  
(4-8")

- Length of body: 2-4 cm  
(0.8-1.6")
- Length of crura: 5-9 cm  
(2-3.5")
- Length: Bulbs: 3-7 cm (1-3")
- Width: 1-2 cm (0.4-.8")





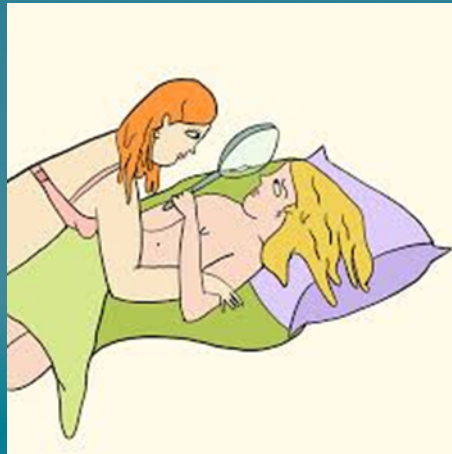
*“I don't know if I've ever had an orgasm”*

ICD 9: 302.73 ICD 10: F52.31

- Education:
  - Anatomy
  - How a person with a clitoris has an orgasm
- Outline a plan

# Pre-orgasmic→Orgasmic

- Let her know that the “self critic” is hovering around
- Distraction is worse with a partner
- But even when someone is *all alone* distraction can prevent orgasm
- *Spectatoring*



# Pre-orgasmic→O

- Let her know that her “self critic” is not working around
- Distraction is worse with partner
- But even with someone *alone* distraction can prevent orgasm
- *Spectatoring*



# Tips

- Contract her pelvic muscles
- Move her pelvis
- Bear down
- Move her head or feet

# To Increase Sexual Response

- Intentionally redirect attention to:
  - physical sexual cues; lubrication, engorgement
  - genital sensations
- Engage more sensory channels with:
  - Auditory stimuli
  - Visual stimuli
  - Olfactory stimuli

# Orgasmic

- Once she can have an orgasm by herself →  
“Show and tell” her partner if she has one
- If she elects penetration →  
include external stimulation as needed
- Coital alignment

# Will I Become Dependent on My Vibrator?

Your “nerve pathways” will learn how to go from A-Z.



You can use a vibrator with a partner.

# Is there a “G-Spot”?

A term coined in 1981 by Addiego, et al.

A “discrete, firm 1.5- 2 cm area anterior to the urethra, that enlarged by 50% at stimulation in one patient.”

(Addiego et al., 1981)

# G Spot

## 2017 anatomic study; 13 cadavers

- All components of the clitoral complex were seen in all specimens (all ages)
- No
  - macroscopic structures other than the urethra and vaginal wall lining were seen
  - erectile or “spongy” tissue in the anterior vaginal wall

(Hoag, Keast, & O'Connell, 2017)

# Conclusion by Study Researchers:

“A G-spot, as described in the medical literature and discussed in the media, as a discrete anatomic entity, does not exist.”

(Hoag, Keast, & O'Connell, 2017)

# Clitoris and Vaginal Wall: 2 sides of 1 structure

- Stimulation to the anterior vaginal wall:
  - Pleasurable
  - Arousing
  - Facilitates orgasm in some women
- Indirect pressure and stimulation to clitoral structures underlying the vaginal wall anteriorly can cause the robust sexual response attributed to the putative G Spot

# Female Ejaculation or Squirting/Gushing?

- Postulated to be two different phenomena.
- “Ejaculation” is the release of a very scanty, thick, whitish fluid from the female prostate
- Squirting is the expulsion of a diluted urine/fluid from the urinary bladder

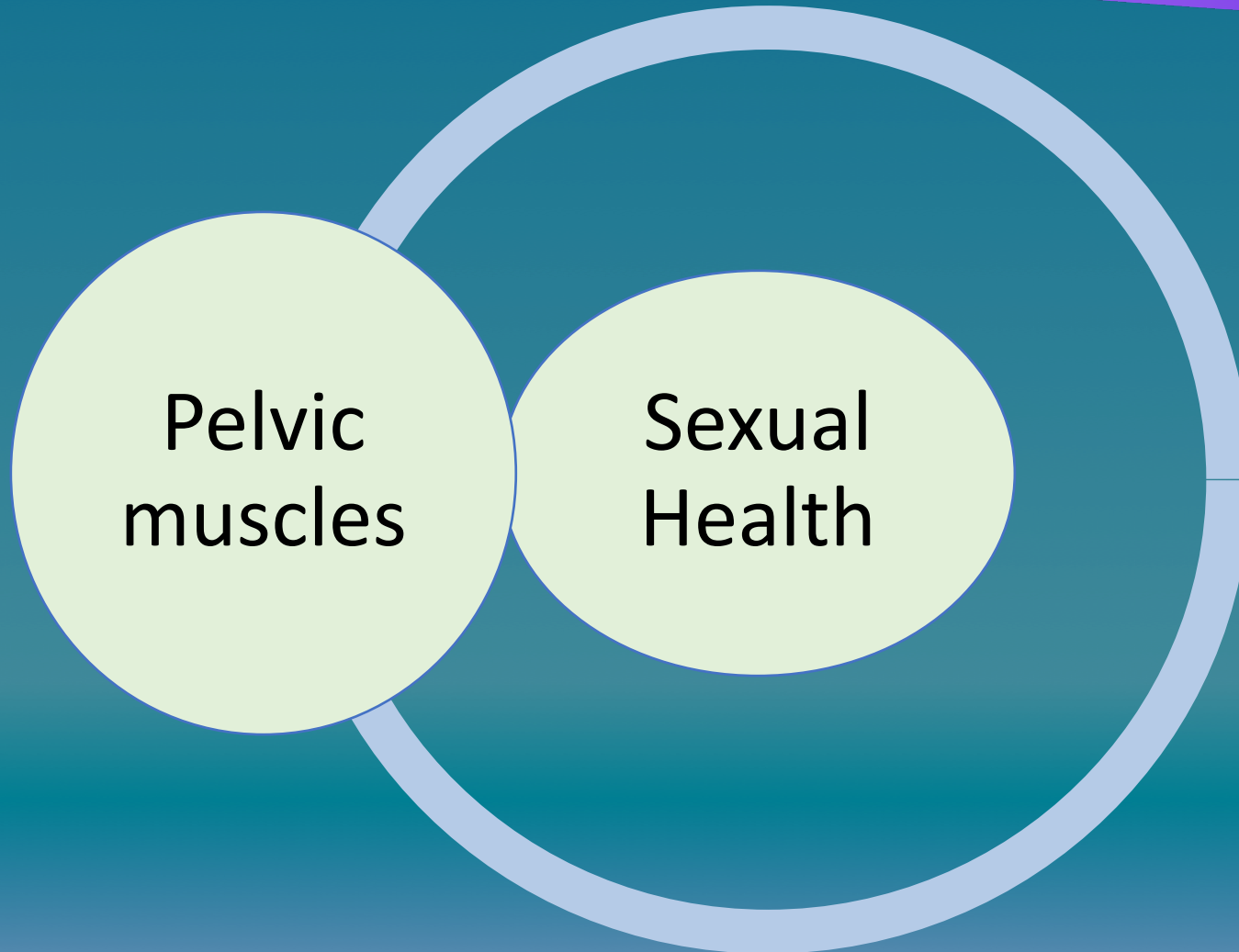
(Salama et al., 2015; Tennfjord, Hilde et al. 2015)

N=7	PSA	Uric Acid	Urea	Creatinine	Color	Volume
Voided urine	0-+	+++	+++	+++	Urine	+++
Squirting	0-+++	+++	+++	+++	Thin watery clear	+++ 15->150 ml
Ejaculate	0-+++	-	-	-  (Salama et al., 2015)	Milky white	Scant .3-4 ml

# Coital Incontinence

- During penetration
- During orgasm
  - Squirting may be a form of orgasmic urinary incontinence
  - Detrusor overactivity has been observed in up to 69% of women reporting orgasmic urinary incontinence

# Cornerstone to Sexual Health



# Pelvic Muscles

## Cornerstone to Sexual Health

- Awareness of pelvic musculature
- Ability to control pelvic muscles
- Strength in pelvic muscles

# Control of Pelvic Muscles

- **Relax** to facilitate initial penetration
- **Contract** around erectile tissue to increase stimulation
- **Tighten** to control penetration

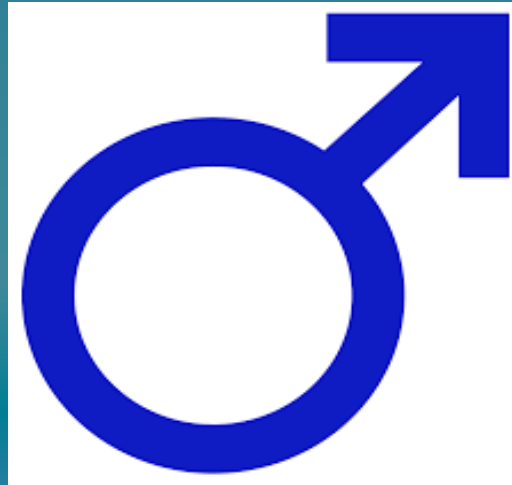
**ICD 10: F52.6**

(Herderschee, et al. 2011;  
Peschers, et al. 2001)



# Control Of Pelvic Muscles:

- Control over pelvic floor muscles
- **Relax** to improve control over the ejaculatory reflex
- Also helpful to prevent dribbling after urination



# Train **Voluntary** Pelvic Muscle Control

- Biofeedback
- Physical therapy
- Digital feedback from clinician

(Braekken, Majida, Ellstrom Engh, & Bo, 2015; Citak et al., 2010; Lowenstein, Gruenwald, Gartman, & Vardi, 2010; Martinez, Ferreira, Castro, & Gomide, 2014; Sacomori & Cardoso, 2015).

# Sexual Agency

## Cornerstone to Sexual Health

The ability to say:

- “yes”
- “maybe”
- “no”

# Sexual Agency

The ability to:


- Initiate sexual interaction
- Explain or show what one likes

• **Positive feedback** Cornerstone to Sexual Health

# Consider A Contract

*Both partners agree:*

- If one partner has the motivation and bravery to initiate a sexual encounter, the partner will be open to try
- It doesn't mean that they will always have sex
- It doesn't mean that they will necessarily have the kind of sex the initiator intended

A photograph of two women standing on a gravel path in a wooded area. The woman on the left is wearing a green zip-up jacket and a black turtleneck, smiling broadly. The woman on the right is wearing a red and white plaid shirt over a white top, also smiling. A black dog with a white fringed tail is standing on the path to the right. Two speech bubbles are overlaid on the image. The first speech bubble is purple and contains the text 'If you can get me aroused, I'm all for it!!'. The second speech bubble is blue and contains the text 'If I initiate, will you give it a go??'.

*If you can get  
me aroused,  
I'm all for it!!*

*If I initiate,  
will you give it  
a go??*

# Sexual-minority Women

- Report feeling:
  - less constrained to follow conventional dictates about their sexuality than previously
  - freer to experiment with and express the range of their sexual desires.
- Increasing celebration of sexual expression
  - woman-positive erotic magazines, books, sex clubs, stores
  - greater acceptance of gender differences

# Positioning

- Furniture
- Pillows
- Side lying
- Coital alignment

# Coital Alignment

Physiologic alignment to:

- Provide consistent and effective stimulation for female coital orgasm
- Make clitoral contact possible during coitus

# Pressure-Counterpressure

- Coordinate stimulus
- Male pubic bone and base of penis rubs against the clitoral complex
- Female moves her pelvis to control the “upstroke” (in)
- Male applies pressure on the “downstroke” (out)

# Twin Prescriptions

“My husband and I had not been having sex for years because he wasn’t able to. But recently he got a prescription... HELP!”



# Communicate & Lubricate

Many sexual issues can be improved with some combination of communication and lubrication

# Nonoxynol 9 (N-9)

Products containing nonoxynol 9 (N-9) can:

- have detrimental effects on lactobacillus
- disrupt vaginal and rectal epithelial lining
- create sloughing which can cause epithelial ulceration

(Ayehunie, et al. 2018; Dezzutti, et al. 2012; Wilkinson, et al. 2019)

# Sexual Lubricants

Some water-soluble lubricants can:

- damage epithelial cells in the vagina, anus, rectum
- increase inflammatory markers in both the lower and upper genital tract
- Increase risk of:
  - discomfort
  - infection including STIs (herpes, HIV)

(Ayehunie, et al. 2018; Begay, et al. 2011; Dezzutti, et al. 2012; Wilkinson, et al. 2019)

# Osmolality

- The osmolality of healthy vaginal fluid is  $370 \pm 40$  mOsm/Kg
- No damage to the epithelial layers seen with lubricants with osmolality of  $<400$  mOsm/Kg

(Ayehunie, et al. 2018; Begay, et al. 2011;  
Dezzutti, et al. 2012; Wilkinson, et al. 2019)

# Hyperosmolality

Lubricants with osmolality  $>1500$  mOsm/Kg have been shown to potentially:

- disrupt the parabasal and basal layers
- Reduce/disrupt skin barrier integrity
- alter vaginal morphology
- be cytotoxic, inflammatory

(Ayehunie, et al. 2018; Begay, et al. 2011; Dezzutti, et al. 2012; Wilkinson, et al. 2019)

# Sexual Lubricants

- **Irritant--Avoid:**

- EZ Jelly
- K-Y Jelly
- K-Y Warming Jelly
- K-Y personal lubricant
- ID Glide
- Astroglide
- Replens
- Boy Butter H2O
- Elbow Grease,
- ID Glide (ultra long-lasting)

(Ayehunie, et al. 2018; Dezzutti, et al. 2012; Wilkinson, et al. 2019)

# Sexual Lubricants

- **Non-irritant—OK to use:**

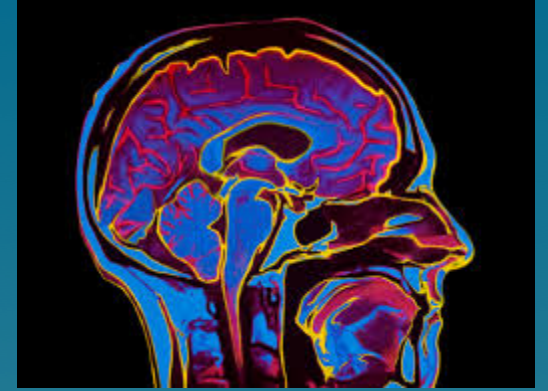
- Aloe Cadabra
- Good Clean Love
- Preseed
- Restore
- PRE
- Slippery Stuff
- Silicone-Based lubricant: Female Condom 2 lubricant
- Silicone-Based lubricant: Wet Platinum
- 

(Ayehunie, et al. 2018; Dezzutti, et al. 2012; Wilkinson, et al. 2019)

# Toxic Toys

- Chemical or plastic smell
- Non-porous
  - 100% silicone
  - glass
  - surgical steel
  - sealed ceramics
  - medical-grade plastics



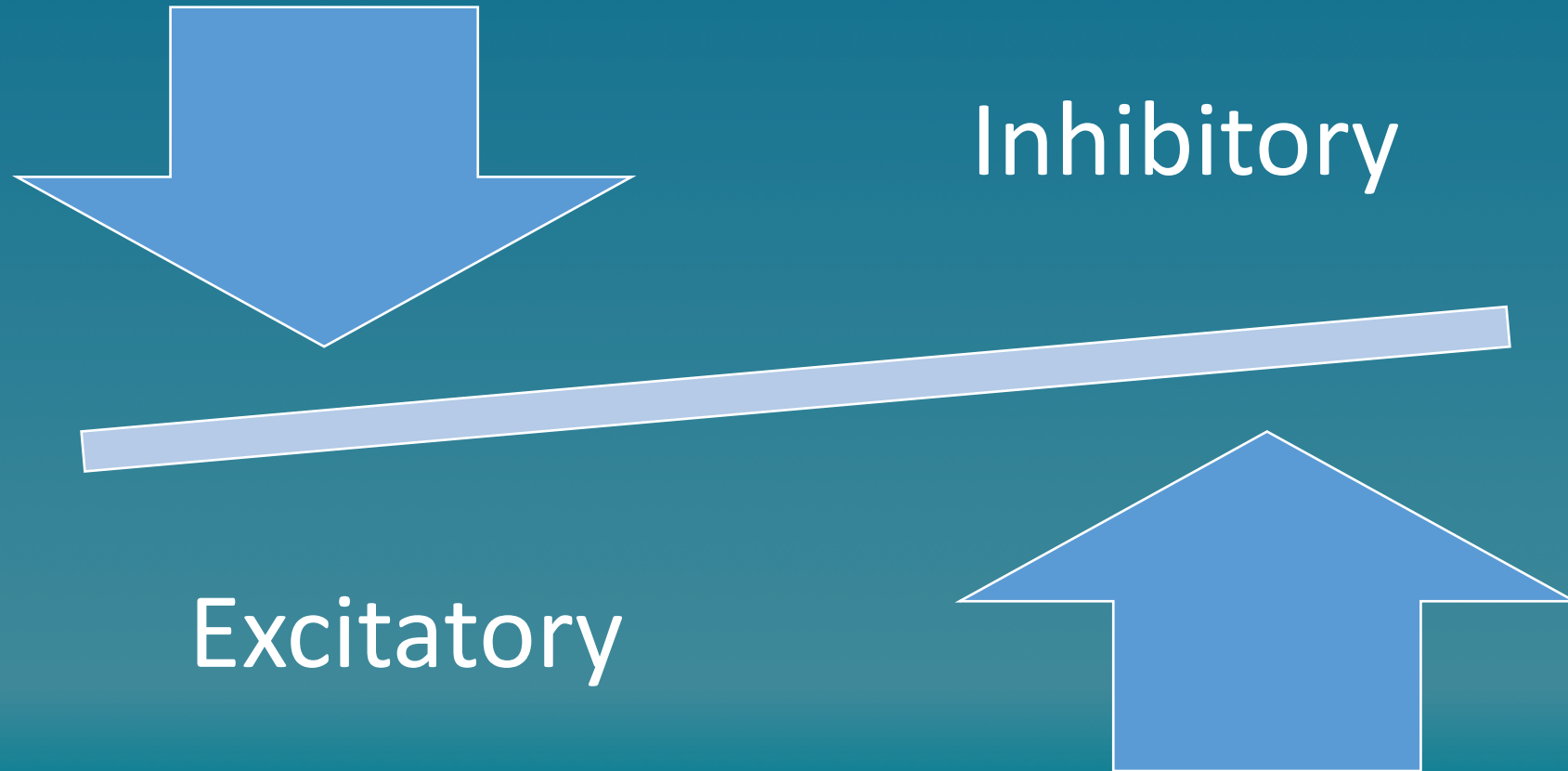


# Sexual Pharmacology & Neurotransmitters

# Caveats

- Most clinical trials do not ask enough about sexual side effects
- Tools for assessing sexual effects are inadequate
- Most data on neurotransmitters is from animal studies

# Accelerator and Brakes



# Sexual Excitation

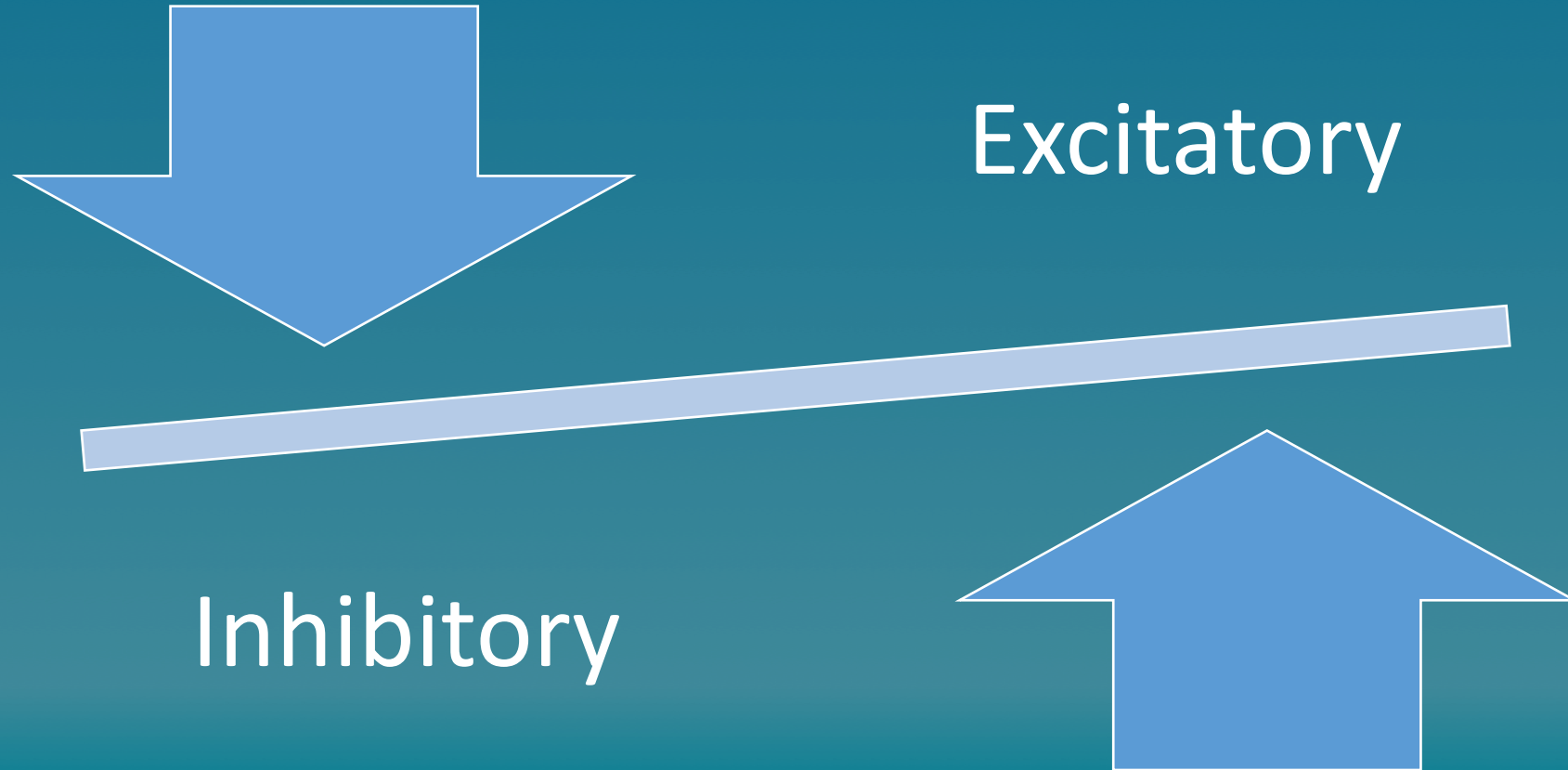
Sexual excitation involves the activation of neurotransmitters

- Noradrenaline (NE) and oxytocin (OT) stimulate sexual arousal
- Dopamine (DA) and melanocortins (MCs) stimulate attention and desire in response to sexual cues and stimulation

# Sexual Excitation

- Nitric oxide increases blood flow in the genitals
- Sexual excitation can be primed:
  - Internally by steroid hormone actions
  - Externally by sexual incentives
  - Externally by drugs that activate excitatory neurochemical systems

# Brakes and Accelerator



# Sexual Inhibition

- Brain opioid, endocannabinoid, and serotonin systems blunt the action of excitatory mechanisms
- This occurs normally at the end of the sexual response cycle during a period of “sexual satiety” or refractoriness (e.g., after orgasm)

# Sexual Inhibition

- Endocannabinoids (ECBs) mediate sedation
- Serotonin (5-HT) induces refractoriness and sexual satiety

(Moll, J.L. (2011). *J Sex Med*  
Pfaus, J. G. (2009). *J Sex Med*)

# Sexual Inhibition

- Can occur if the endogenous inhibitory mechanism is activated by:
  - A situational variable (stress)
  - Drugs that augment their actions

(Higgins, A. (2010). *Drug Health Patient Safety*  
Moll, J.L. (2011). *J Sex Med*  
Pfaus, J. G. (2009). *J Sex Med*)

# Sexual Inhibition

- Inhibitory mechanisms can be activated when sexual excitatory mechanisms are blunted:
  - Endogenously
  - Exogenously due to drugs that directly diminish excitatory influences

(Moll, J.L. (2011). *J Sex Med*  
Pfaus, J. G. (2009). *J Sex Med*)

# Sexual Complaints with Antidepressants

Decreased desire

Diminished erection

Painful ejaculation

Priapism

Loss of sensation in the vagina and nipples

Nonpuerperal lactation

Persistent genital arousal

Diminished or delayed orgasm

Delayed ejaculation

Decreased excitement

(Higgins, Nash et al. 2010; Kronstein, Ishida et al. 2015; Moll, Brown 2011)

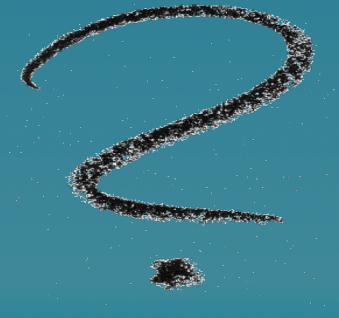
# Antidotes

- Bupropion (DA, NE)
- PDE-5 inhibitors (NO)
- Exercise (increase in SNS)
- Maca root, Rosa damascena oil
- T, Ephedrine, Ginko biloba - mixed results

(Clayton, Warnock et al. 2004; Farnia, Shirzadifar et al. 2015; Fooladi, Bell et al. 2014; Lorenz, Meston 2012; Nurnberg, Hensley et al. 2008; Pereira, Arias-Carrion 2014. Taylor, Rudkin 2013)

# Neuroleptics

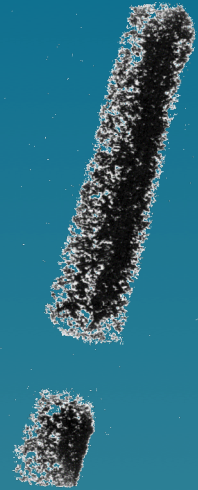
- Negative effects
  - Mood stabilizers
  - Anticonvulsants
- Insufficient evidence
  - Anxiolytics drugs



Schmidt, H. M (2012). *Cochrane Database Syst Rev*  
La Torre, A. (2014) *Pharmacopsychiatry*  
Elnazer, H. Y. (2015). *Hum Psychopharmacol*

# Antidotes Neuroleptics

- Switching from enzyme-inducing to non-enzyme-inducing anticonvulsant drugs
- Adding a PDE-5 inhibitor



Schmidt, H. M (2012). *Cochrane Database Syst Rev*  
La Torre, A. (2014) *Pharmacopsychiatry*  
Elnazer, H. Y. (2015). *Hum Psychopharmacol*

# Cardiovascular Medications

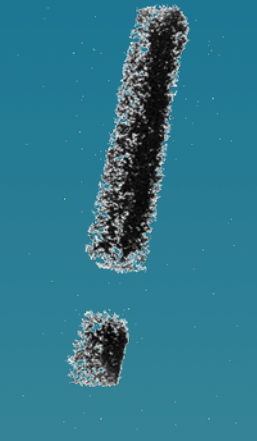
## Negative effects

- Diuretics
- Beta-blockers

# Cardiovascular Medications (continued)

## Neutral

- ACE inhibitors
- calcium antagonists



## Possible beneficial effects

- Angiotensin receptor blockers

# Searchable Directories of Sex Therapists by Geographic Area.

American Association of Sexuality Educators,  
Counselors, and Therapists

[www.aasect.org](http://www.aasect.org)

International Society for the Study of Women's Sexual  
Health

<http://isswsh.org>

# APTA

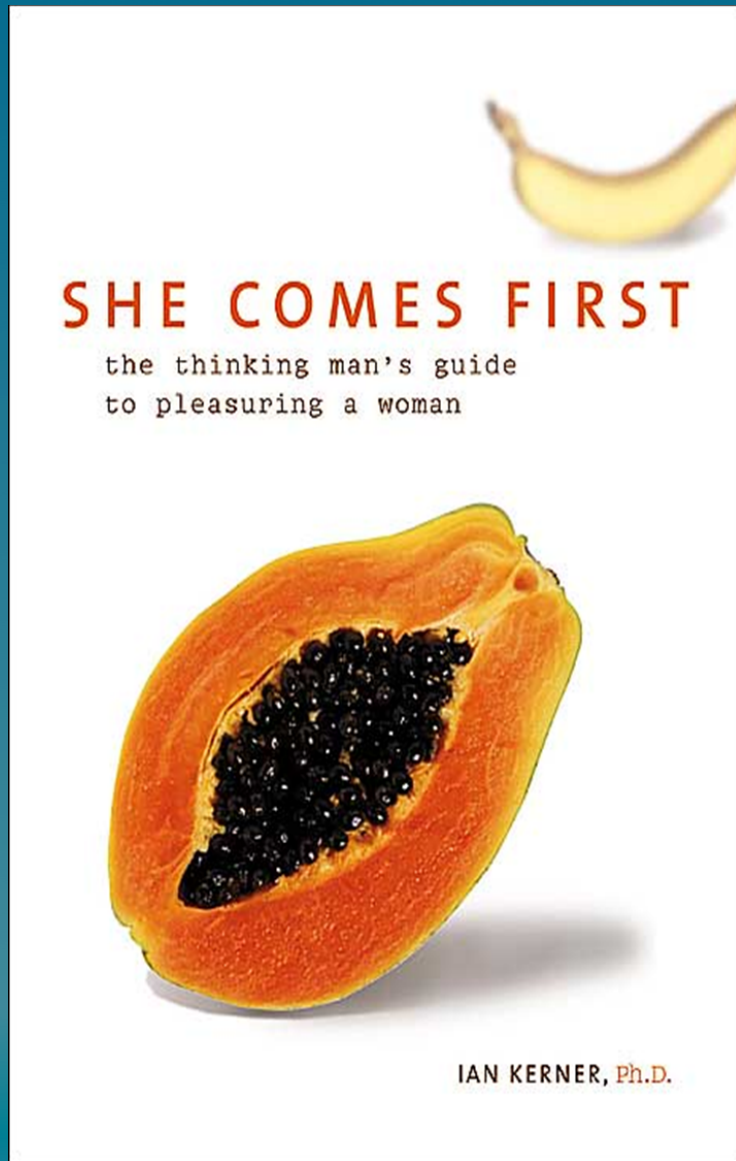
Physical therapy society section specializing in women's  
Health

<http://www.womenshealthapta.org/>

Questions?



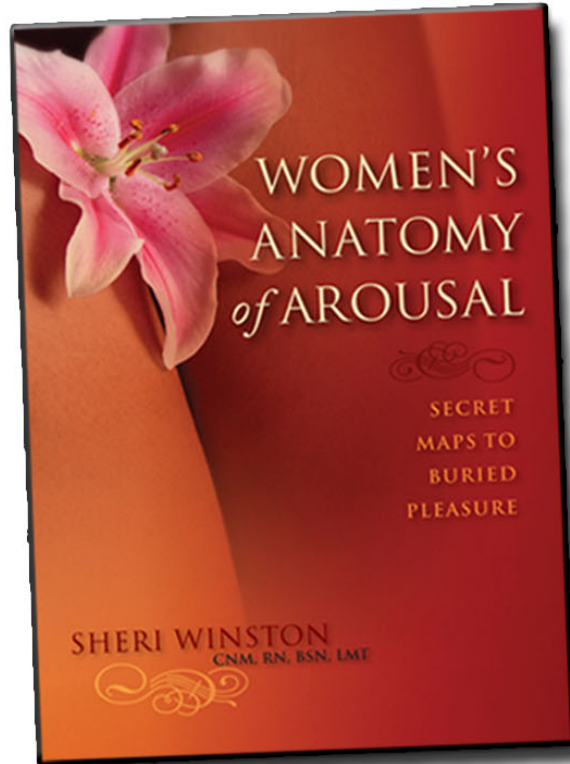
# Resources



“Most men know more about what’s under the hood of their car than under the hood of the clitoris”

# Women's Anatomy of Arousal

## *Secret Maps to Buried Pleasure*

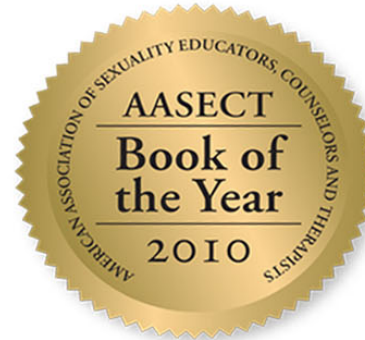


By Wholistic Sexuality Teacher  
Author & Anatomy Illustrator

**Sheri Winston**  
**CNM, RN, BSN, LMT**

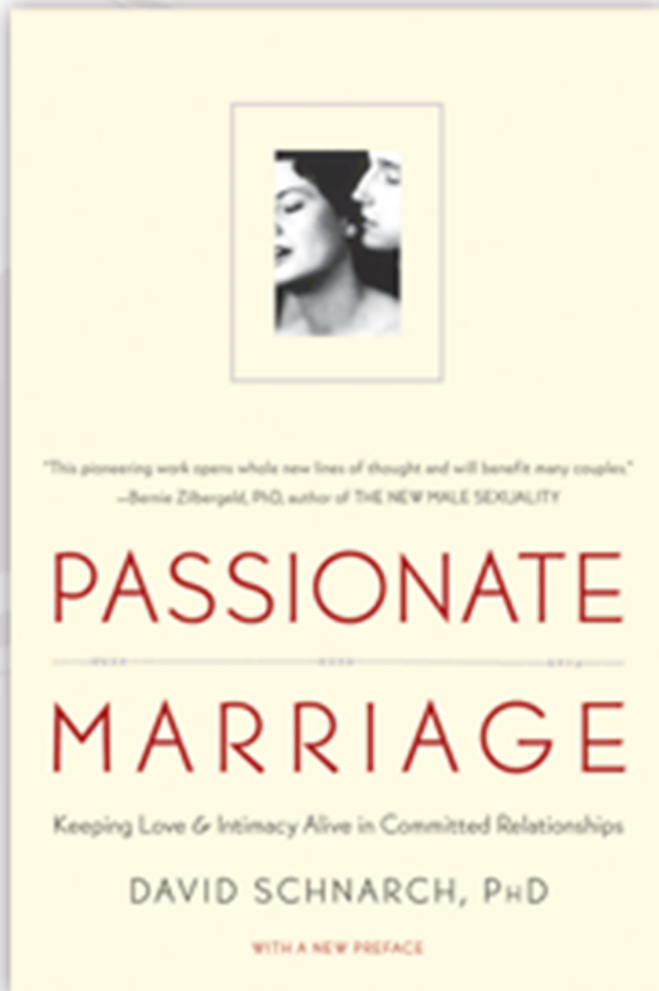
"The most comprehensive, user-friendly,  
practical and uplifting book  
on women's sexuality  
I've ever read"

Christian Northrup  
MD, Author  
*Women's Bodies,  
Women's Wisdom*



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**SHERI WINSTON'S CENTER FOR THE INTIMATE ARTS**

# The pioneering guide to intimacy and sexuality



Passionate Marriage is recognized as the pioneering book on intimate human relationships. With a new preface by the author, this updated edition explores ways we can keep passion alive, and even reach the heights of sexual and emotional fulfillment. This book's revolutionary approach keeps the sparks flying by helping you and your relationship come alive. Passionate Marriage helps couples overcome relationship hurdles and reach their fullest potential as lovers and human beings.

from the "101 NIGHTS OF . . ." Series

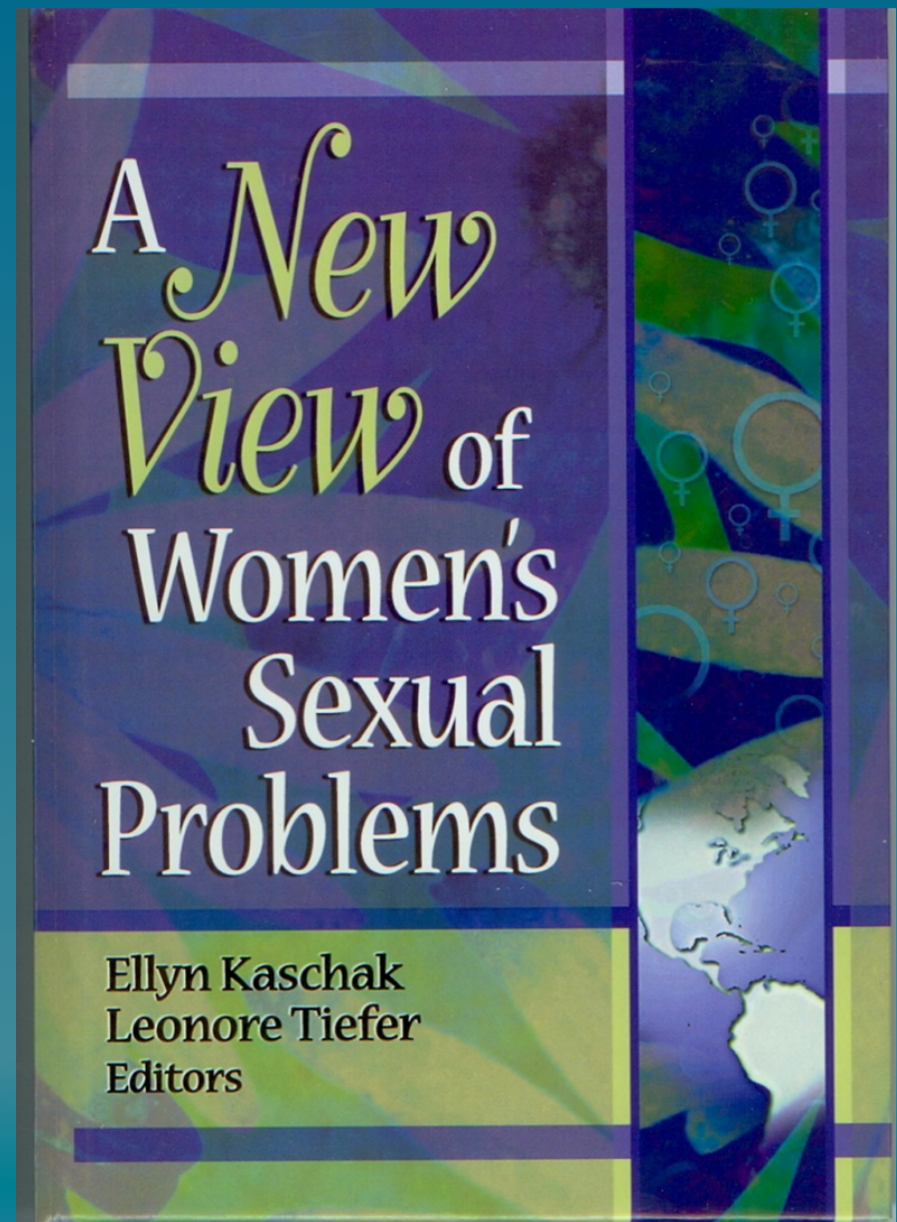
# 101 Nights of™



## GRRREAT Sex

by Laura Corn

Kaschak E, Tiefer L.  
Binghampton, NY: The  
Haworth Press, Inc.,  
2001.



# BEDSIDER: FRISKY FRIDAYS

- “User friendly”, *accurate* information
- [Http://bedsider.org/](http://bedsider.org/)



# Intimate Partner Violence (IPV)

Reproductive Health Safety cards can be ordered from:

[www.futureswithoutviolence.org/onlinestore](http://www.futureswithoutviolence.org/onlinestore)

URL link to short PSA video on You Tube:

[http://www.youtube.com/watch?v=W6wqUuN8J0k&feature=player\\_embedded](http://www.youtube.com/watch?v=W6wqUuN8J0k&feature=player_embedded)

©2011 Futures Without Violence

*Formerly Family Violence Prevention Fund*

**ICD 10: Z69.11**

# ©2011 Futures Without Violence



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- Bassett R, Bourbonnais V, McDowell I. Living long and keeping well: elderly Canadians account for success in aging. *Can J Aging.* 2007; 26(2): 113-126.
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