

PREGNANCY REPERCUSSIONS ON FEMALE SEXUALITY

Hypothesis / aims of study

To evaluate the satisfaction rate and the occurrence of sexual dysfunction in pregnancy.

Study design, materials and methods

A retrospective study. Were analyzed 130 questionnaires obtained from the files of women assisted by the physiotherapy group team of prenatal care in a university hospital in São Paulo – Brazil, between February 2007 and April 2008. The questionnaires contained questions about sexual satisfaction and sexual dysfunction of both pregnant women and their partners. Inclusion criteria were singleton pregnancies, from the 12th week of gestational age at the time of interview, without clinical or obstetrics repercussions and questionnaires filled out. Exclusion criteria consisted in women without sexual activity since beginning of pregnancy. For statistical analysis were used chi-square and analysis of variance (ANOVA) with post-Bonferroni test with a significance level of 5%.

Results

The mean age of patients was 27.9 ± 6.5 years, 43.8% (57) married, 37.7% (49) didn't finished high school, and 58.5% (76) were Catholic. The mean gestational age at the time of the interview, was 25.4 ± 7.1 weeks, with minimum age of 12 and maximum of 39 weeks. The data from this study showed that 48 (36.9%) women and 59 (45.4%) partners, have proven to be afraid of sexual activity during gestational period. During pregnancy, it was observed that 83 (63.8%) patients had a libido decrease, 89 (68.5%), reduced willingness to initiate sexual intercourse, but 113 (89.9%) had vaginal lubrication after being properly stimulated. The application of ANOVA and post-Bonferroni test showed that there was no correlation between the presence of vaginal lubrication and the number of pregnancy ($p=0.062$) and deliveries ($p=0.60$). When questioned about some sexual responses during pregnancy, 55 (42.3%) patients had no sexual desire, 50 (38,5%) lack of sexual arousal, and 55 (42.3%) could not complete the orgasmic phase. It was also observed that 55 (42.3%) had dyspareunia. The results also showed that a significant reduction ($p = 0.001$) in orgasmic reflex when compared to the prior to pregnancy period (Table 1). Regarding sexual satisfaction, 82 (63,1%) considered themselves to be satisfied sexually, 11(8,5%) dissatisfied, while for 20(15,4%) sexual satisfaction was indifferent and 17(13,1%) hadn't had sex in the period of the study.

Interpretation of results

It is possible that the many physical and psychological changes that occur in the woman's body during pregnancy, directly influence their sexuality¹, which awakened on us interest in analyzing the change in sexual behavior during this phase of female life. The prevalence of sexual dysfunction was high, since approximately 40% of pregnant women reported some type of disorder, like other studies, where the frequency of sexual dysfunction during pregnancy ranged from 12%² to 100%³. It is therefore important problem of women's health, with significant impact on quality of life during pregnancy. In this study, we found also that 63.1% of women were sexually satisfied, despite the complaints of dyspareunia, lack of desire, lack of arousal and anorgasmia. This finding makes us believe that sexual satisfaction during pregnancy is not always related only to the physical component pleasure, but mostly psychological, which constitutes an important element in this stage of female life. Thus, sexuality for these women is not synonymous with genital area. It is important during the gestational period for women to receive love by caresses, massages and loving touch. Because sexual satisfaction is mainly linked to affection, emotion, communication and pleasure.

Table 01: Orgasm reflex presence in the period before and during pregnancy.

Orgasm	Before Pregnancy		During Pregnancy		P*	Concluding message
	N	%	N	%		
Yes	115	88,5	91	70,0	0,001	Although women are considered to have met with their sexuality in pregnancy,
No	15	11,5	39	30,0		
Total	130	100,0	130	100,0		

*Chi-square test.

decreased desire and orgasmic reflex are present throughout this period.

References

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3. Pepe F, et al Parity and sexual behavior in pregnancy. *Clin Exp. Obst. Gyn*. 1987, 14: 60-65

<i>Specify source of funding or grant</i>	Without funding or grant
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	Yes
<i>Specify Name of Ethics Committee</i>	Comitê de ética e pesquisa do Hospital São Paulo - UNIFESP/ EPM
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	No