COULD SEXUAL FUNCTION BE IMPROVED BY SURGERY?

Hypothesis / aims of study
To evaluate the sexual function after post. colpoperineorrhapy, which was performed on those who did not have a rectocele.

Study design, materials and methods
Fifty-four patients who underwent post. colpoperineorrhapy were enrolled in this study. Seven women dropped out during the 4 month follow up period. They completed the FSFI (The female sexual function index) questionnaires before the post. colpoperineorrhapy and 4 months after.

Results
The percentage of those who had sexual contact more than once per month increased from 19% prior to surgery to 63% after surgery. (p<0.01). Approximately 38% of the women were satisfied with the frequency of coitus before surgery and 64% were satisfied after surgery (p<0.01). 18 % of women responded that they experienced sexual desire 'more than or about half the time' before surgery. However, after surgery, this rate increased to 45%. (p<0.01). 15% of women answered that they had a 'high or very high' sexual desire or interest prior to surgery and 34% responded so after surgery. Those who felt sexual arousal 'more than half the time' increased from 34% before surgery to 69% after. Those who answered 'very high or high' aroused sexually increased from 23% to 69% after surgery (p<0.01). The frequency of lubrication and orgasm increased after surgery. Regarding the degree of discomfort or pain during vaginal penetration, 24% felt a 'very high or high' level of pain before surgery, and 6% reported this after (p<0.01).

Interpretation of results
The caliber of introitus can affect the female sexual function.

Concluding message
Post. colpoperineorrhapy increases the female sexual function after surgery

References