# You Should be Dancing: Restoring the Rhythm of Intimacy

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### **Do We Need Connection with Others?**

- We are all hard wired for connection to others- it is not optional!- Daniel Goleman, Social Intelligence
- Hierarchy of Human Needs- Maslow
- Vulnerability is scary and we shield ourselves from hurtful emotions
  - Brown, Brene. The Gifts of Imperfection, Daring Greatly and Rising Strong

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### **Demographics of Couples**

- US 2024 Divorce Stats, indicate 40-50% of first marriages and 60-67% of second marriages end in divorce.
- Those who remain together are sometimes unhappy
- A stable, happy marriage is a minority of marriages/couples

https://www.census.gov/library/stories/2024/10/marriage-and-divorce.html Abreu-Afonso, J., Ramos, M. M., Queiroz-Garcia, I., & Leal, I. (2022). How Couple's Relationship Lasts Over Time? A Model for Marital Satisfaction. *Psychological reports*, 125(3), 1601–1627. https://doi.org/10.1177/003329412110006511 Goal of Couple's Therapy To create a more accepting and adaptive relationship based on the realities of each person

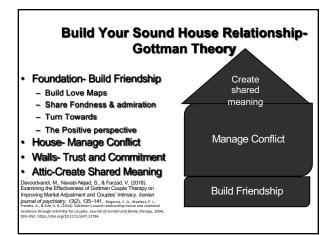
Improve relationship and life satisfaction

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### Evidenced Based Treatments for Couples

- Non-behavioral approaches
  - Emotionally focused couple Therapy (Sue Johnson)focus on identifying and exploring emotional experiences to transform them and manage them
  - Insight focused couple therapy- reveal insight into each others experience
- Behavioral approaches
  - Traditional behavioral couple therapy
  - Cognitive behavioral couple therapy
  - Integrative behavioral couple therapy

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# Integrative Behaciorial Couple Therapy (IBCT)

- Based on building acceptance and change as positive outcomes for therapy
- Explore behaviors and what thinking is behind them and the impact on the partner
- Three Therapeutic Methods of IBCT
  - Affective Change- compassionate discussionempathetic joining
  - Cognitive Change- analytic discussion-Unified detachment-new perspective to fix the problem
  - Behavioral Change- practical discussion- concrete ways to improve things
  - Christensen, A., & Doss, B. D. (2017). Integrative Behavioral Couple Therapy. *Current opinion in psychology*, 13, 111–114. https://doi.org/10.1016/i.cossvc.2016.04.022] Jacobson, N.S. & Christensen, A.

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### **Sexuality & Intimacy**

- Sexuality-intrinsic, multidimensional, dynamic characteristic that is individually and culturally defined & experienced. The sense of being male or female.
- Everyone is different and so sexual needs vary from person to person.
- Intimacy-"process by which two people attempt to move toward complete communication on all levels" -Hatfield, 1982, In Fisher & Stricker (Eds.), Intimacy

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### **Sexual Dysfunction**

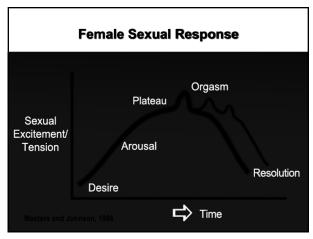
- Consistent impairment of a person's normal sexual interest, response and/or function.
- The persistent impairment of a couple's normal or usual patterns of sexual interest and/or response

- AFUD concensus conference, 1998 (Basson, et al, 2000)

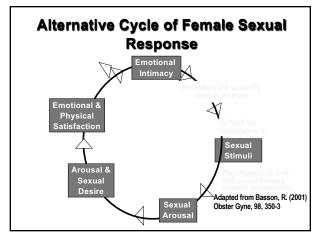
### **Sexual Response Cycle**

- Excitement
- Plateau
- Orgasm
- Resolution
- Male=avg. 2.8 minutes
- Female=avg. 13 minutes - Masters & Johnson, 1966

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- Hypoactive Sexual Desire Dysfunction
- Sexual Arousal Dysfunction- ED in Men or PE, Lack of lubrication/atrophy in women
- Orgasmic Dysfunction
- Pain disorders- Dyspareunia (Deep or superficial, Genitourinary Syndrome of Menopause (GSM), Vulvodynia, Vaginismus

Reed GM, Descher J, Kruege RB, Atalia E, Cochran SD. First MB, Cohen-Kettenis PT, Arango-de Montis I, Parish SJ, Cettler S, Briken P, Saven S. Disorders related to sexuality and gender identity in the ICD-111 reviring the ICD-10 destication based on current scientific evidence, hext clinical practices, and human rights considerations. World Psychiatry. 2016 Oct; 15(3):205-221. doi: 10.1002/wps.20354. Erratum in: World Psychiatry. 2017 Jun; 16(2):220. doi: 10.1002/wps.20433. PMID: 27717275; PMCID: PMC5023610.

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# **Erectile Dysfunction**

- "The consistent or recurrent inability to attain and/or maintain a penile erection/rigidity sufficient for sexual performance/satisfaction."
  - Burnett, A.L. et al. (2018). Erectile dysfunction: AUA guideline 2018. https://www.auanet.org/guidelines/male-sexual-dysfunction-erectiledysfunction-(2018).

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# Expanded Thinking about Intimacy and Sex

- It is about pleasure
- There are many, many ways to experience sexual pleasure (don't limit you or your partner to only penetrative sex)
- The excitement comes from the anticipation and from the mystery of where intimacy will lead us today
- · Intimacy is important

# What are the goals in terms of intimacy and sex?

- Intimacy is communication on all levels and connectedness
- If sex is about pleasure and connectedness there are many ways to achieve those goals
  - Men and women can both climax/orgasm without intercourse or penetration
  - There are many ways to enjoy affection, connection and pleasure
- Communication with partners is key and talking about sex doesn't come easilypractice helps!

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# **Oral Agents**

INTERVENTION: MEDICAL TREATMENTS - Oral Therapies

PDE Type 5 inhibitors primary drug class - oral erectile dysfunction therapy

Sildenafil (Viagra) 25-100mg

Vardenafil (LeVitra) 5-20 mg; Staxyn 10 mg disentegrating tablet

Tadalafil (Cialis) 5-20 mg on demand and 2.5-5mg Daily

Avanafil (Stendra) 50-200mg

Drugs are potent, selective inhibitors of type 5 phosphodies terase - improve erectile function by inhibiting breakdown of cyclic  $\rm GMP$  - smooth muscle relaxation enhanced

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# **Sexual Dysfunction**

INTERVENTION: Vacuum constriction device (VCD)

FDA approved for over the counter distribution - efficacy rates of 80%-90% reported

Apply negative pressure to flaccid penis, drawing venous blood int the penis, retained by elastic constriction band at penile base



### **ED Treatment**

**INTERVENTION: Intracavernosal Injections** 

FDA-approved self-injections - alprostadil sterile powder (Caverject Impulse) and alprostadil alfadex (Edex)

Compounded formulas- bimix, trimix, & quad mix (contain combinations of prostaglandin, phentolamine, &/or papaverine- off label/non-FDA approved)

Injected at the base of the penis with a diabetic needle

Hatzimouratidis, K. et al. (2016). Pharmacotherapy for erectile dysfunction: Recommendations from the 4<sup>th</sup> International Consultation for Sexual Medicine [ICSM 2015]. JSM, 2016(13), 465-488. American Urological Association. (2005, June 2007). Management of Erectile Dysfunction. 3rd Edition. Retrieved October 15, 2012, 2012, from <u>http://www.auanet.org/content/guidelines-and-quality-care/clinical-guidelines-and-quality-care/clinical-guidelines-and-guid</u>

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# Treatment for Vaginal Atrophy and Lack of Lubrication during Sex

- Clinical guidelines for atrophic vaginitis concluded that local estrogen replacement is the first choice to improve vaginal mucosal thickness, decrease vaginal pH and diminish vulvovaginal atrophy.
  - pH and diminish vulvovaginal atrophy. Johnston, S.L. et al. (2004). SOGC Joint Committee-Clinical Practice Gynaecology and Urogynaecology. The detection and management of vaginal atrophy. Journal of Obstetrical Gynecologic Cancer, 26, pp. 503– 518.
- Vaginal rings, creams and tablets work equally well for local estrogen replacement-follow prescribing information
  - Suckling, J., Lethaby, A., and Kennedy, R. (2006). Local oestrogen for vaginal atrophy in postmenopausal women, *Cochrane Database Syst Rev* 18, CD001500.
- Variety of Non-hormonal Moisturizers and Lubricants Available

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# Non-hormonal Moisturizers or Soothing Creams

- Neogyn Vulvar Soothing Cream- non-medicated cosmetic cream formulated with Cutaneous Lysate to sooth/comfort vulva; free of parabens, propyline glycol, color additives, fragrances, analgesics that can dull sensation. Applied BID for about 6-8 weeks.
- Cocoanut oil
- · Vitamin E vaginal suppositories
- · Replens, Luvena KY Liquibeads moisturizer
- · Hyaluronic acid vaginal moisturizers
- NeuEve Natural Feminine Suppositoryvaginal moisturizer and odor eliminator. Contains palm oil, beeswax, tapicca starch, inulin, frutos-oligosaccharides, soy lecithin, orange oil, tocopherois (vitamin E) and proprietary blend

### **Desire Disorders Non Hormonal**

- · Rule out and treat underlying causes
- Psychotherapy/Psych referral for avoidance due to traumatic past experience
- Simmering/Bibliotherapy
  Groljohann, Yvonne. (2001). Capitive-behavioral Bibliotherapy for Sexual Dysfunctions in
  Heterosexual Couples: A Randomized Waiting-lat Controlled Clinical Trial in the Netherlands. Journal
  of Sex Research, 38(1), 31-87
- Sensate Focus- planned loveplay- series of progressive exercises with the goals of increasing willingness to be sexual, relaxation with sex/intimacy, increased sensuality. Individualized to couple
  - Masters and Johnson, Human Sexual Inadequacy, 1979

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### **Resources for Patients**

- <u>http://www.northshore.org/urological-health/patient-education/sexual-health-videos/</u>
- www.drjeffalbaugh.com
- www.drjeffsextalk.com
- http://www.sexualhealthmatters.org

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### **Key Points**

- Sexual & intimacy are part of the human journey and connectedness and belonging are basic human needs
- Sexual & intimacy issues can be addressed successfully
- Don't underestimate the power of being fully present with the patient and acknowledging their issues