

# Sexual Problems in MS

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Changes in sexual function are common in people living with MS and in the general population. Many chronic conditions contribute to sexual dysfunction. The first step in managing changes in sexual function is to identify what is happening; the second is to talk with your partner; and the third is to consult your healthcare provider. Neurologists, urologists, and primary care providers can help with these issues.

## Primary sexual dysfunction

Refers to problems directly caused by the MS disease process. Lesions in the central nervous system (CNS) slow or block signals between the brain, spinal cord, and parts of the body that are involved in the sexual response.

Symptoms of sexual dysfunction include:

- Decreased sexual arousal.
- Altered, decreased, or painfully heightened sensations.
- Reduced vaginal lubrication.
- Difficulty achieving or maintaining an erection.
- Difficulty reaching orgasm.
- Difficulty ejaculating.

## Addressing primary sexual dysfunction

- Keeping open lines of communication with your partner – what has changed, what feels good and what doesn't.
  - Diminished arousal is best addressed by creating a relaxing and romantic atmosphere.
  - Sometimes extending the period of foreplay helps stimulate arousal.
- A variety of medications are available to treat sexual dysfunction.
- Liquid or jellied, water-soluble lubricants can be used for vaginal dryness.
- Sometimes manual or oral sex or a vibrator can increase stimulation and arousal and provide the additional stimulation needed to achieve orgasm.

## Secondary sexual dysfunction

Refers to problems caused by other MS symptoms or medications.

- Fatigue, sensory changes, spasticity (muscle stiffness), pain, bladder or bowel issues, and cognitive changes can all interfere with sexual arousal and sexual activity.
- Medications, including those used to treat an overactive bladder and depression, can interfere with sexual function.

### **Addressing secondary sexual dysfunction**

- Work with a healthcare provider to evaluate and address medications that might be interfering with sexual function.
- Work with a healthcare provider to ensure effective management of MS symptoms to reduce impact on sexual function.
- Adjust time of day, sexual position, and timing of medications to reduce difficulties.
- Manage urinary leakage during intercourse with strategies such as intermittent catheterization or pelvic floor exercises.

### **Tertiary sexual dysfunction**

Refers to thoughts, feelings, attitudes, and concerns that can interfere with arousal and performance including:

- Feeling unattractive.
- Depression.
- Believing that sexuality is incompatible with disability.

### **Addressing tertiary sexual dysfunction**

- Manage feelings and concerns through open conversation with your partner.
- Seek help from a counselor.