



25444 - Unnoticed sexual dysfunctions and their impacts on women's health: a cross-sectional study

Alves A¹, Souza N¹, de Oliveira M², dos Santos A², Rett M³, Salata M⁴, Bradaschia J¹, Giacomo R¹, Boechat T¹, Rocha C¹, Medeiros G¹, da Silva M¹, de Azevedo M², Paplinskie S⁵, Mottola M⁵, Borges M²

1. University of Brasilia, 2. University Center of Brasilia, 3. Federal University of Sergipe, 4. Uniceplac, 5. University of Western Ontario

Hypothesis / aims of study

The aim of this study is to analyze the prevalence of unobserved sexual dysfunctions and their impacts on women's health. The hypothesis is that the prevalence of unnoticed sexual dysfunction will be high.

Study design, materials and methods

This is a cross-sectional study with data collection carried out from August to October 2022 using an online questionnaire. Participants were invited through social networks (Instagram, Facebook, and WhatsApp) to participate. The inclusion criteria were: women over 18 years old who have an active sexual life, were in agreement with the research, and signed the free and informed consent form. Exclusion criteria were: women undergoing oncological treatment and psychological illness. An online questionnaire (Google Forms) was used, with 62 questions that were divided into sociodemographic prole (age, marital status, education, religion, profession, family income, children, contraceptive method), health condition (treatment with a psychiatrist or oncologist, use of medications, physical activity, prevalence of abuse), FSQ (female sexual quotient), and questions about sexual self-perception.

The Female Sexual Quotient (FSQ) is a questionnaire used to assess female sexual function, consisting of 10 questions focusing on four items: sexual desire and interest, foreplay, women's arousal and harmony with their partner, orgasm, and sexual satisfaction. Each answer is assigned a value from 0 to 5, where 0 means "never" and 5 means "always", and then a mathematical calculation is carried out that allows obtaining a nal score. Data were expressed as percentages and frequencies, and the Excel (16.42 - 2020) program was used.

Results

One hundred nineteen Brazilian women participated in this study, with a mean age of 25.4 ± 6 years. The majority declared themselves single (62.2%), followed by married (19.3%), in a stable union (16.8%), and nally divorced (1.7%). The level of education showed a predominance of higher education, being complete for 43.7% and incomplete for 45.5%. Of the participants, 69.7% have a religious aliation, 78.15% do not take medication, and 16.8% use antidepressants. Regarding contraceptive methods, although 32.8% did not use any type of contraception, the contraceptive pill stood out as the most prevalent method (26.9%), followed by the non- hormonal IUD (12.6%) and hormonal IUD (11.76%). Monthly family income was distributed as follows: 33.6% had 1 to 2 minimum wages, 36.1% declared 3 to 5, and the remainder had 5 or more minimum wages. Only 18.4% of the sample has children, with cesarean section being the most common method of delivery, occurring in 77.7% of cases.

Table 1: FSQ Pontuation

Question	Mean	SD
Do you usually thing spontaneously in sex, remember about it or imagine yourself in sexual intercourse?	2.84	1.09
Is your interest in sex enough for you to be in the mood to participate in a sexual intercourse?	3.96	1.08
Foreplay stimulates you to continue sexual intercourse?	4.65	0.71
Do you usually get wet (lubricated) during sexual intercourse?	4.05	1.09
During sexual intercourse, as your partner's arousal increase, do you also feel more stimulated?	4.26	0.92
During sexual intercourse, do you relax the vagina enough to facilitate penetration of the penis?	3.92	1.26
Do you usually feel pain during sexual intercourse when penis penetrates your vagina?	1.21	1.19
Can you get involved without being distracted during sex?	3.44	1.26
Are you able to reach orgasm during sex?	3.26	1.40
Does your sexual satisfaction encourage you to enjoy sex more frequently?	4	2.70

According to the score on the Female Sexual Quotient (FSQ) scale (Table 1), 54 women rated their sexual performance standard as highly satished (45.38%), 52 as partially satished (43.7%), 10 as average (8.40%), 2 as dissatised (1.68%), and 1 as highly dissatised. (0.84%).

Considering the scale of 0 being never and 5 being always, the questions with the highest average were questions 3 (about foreplay stimulation), 4 (about lubrication), and 5 (partner's arousal). The questions that had the lowest average were questions 7 (about pain during sexual intercourse) and 1 (about thinking spontaneously), respectively. Furthermore, 90% of the questions scored above average.

Fifty-one of the interviewees (42.9%) responded that they considered it normal not to think about sex spontaneously, and 30.3% considered it normal to think about sex spontaneously. One hundred ve women (88.2%) didn't consider it normal to not be lubricated, and 108 (90.8%) didn't think it was normal to feel pain during sexual intercourse. Regarding being distracted during sex, 56.3% didn't consider it normal. Of the participants, 58.8% (70) women didn't consider it normal not to reach orgasm, and 31.9% considered it normal not to reach it (Table 2).

Table 2: Questions about perception of normality

Question	Answer	N	%
Do you consider it normal not to think about sexual intercourse spontaneously?	Yes	51	42.9%
	No	36	30.2%
	Did not know how to answer	32	26.9%
Do you consider it normal not to be lubricated?	Yes	10	8.4%
	No	105	88.2%
	Did not know how to answer	4	3.4%
Do you consider it normal to feel pain during sexual intercourse?	Yes	5	4.2%
	No	108	90.8%
	Did not know how to answer	6	5%
Do you consider it normal to feel distracted during sexual intercourse?	Yes	30	25.2%
	No	67	56.3%
	Did not know how to answer	22	18.5%
Do you consider it normal not to reach orgasm?	Yes	38	31.9%
	No	70	58.8%
	Did not know how to answer	11	9.3%

When asked about abuse, 58 women (48.7%) said they had suffered some type of abuse. Among them, 39 (32.8%) declared having suffered verbal abuse, 36 (30.3%) reported having suffered emotional or sexual abuse, 24 (20.2%) claimed to have suffered physical abuse, and 9 (7.6%) did not want to respond. Furthermore, 53 women (44.5%) did not suffer abuse, and 8 (6.7%) preferred not to respond.

Interpretation of results

Although the population of female respondents mostly had complete and incomplete higher education (89.2%), there were respondents who considered it normal to feel pain during intercourse (4.2%) and considered it normal not to have an orgasm during sexual intercourse (31.9%), signs suggestive of sexual dysfunctions. It shows the importance of health professionals in combating stigmas related to sexual health, focusing on educating women about their own bodies in physiological and pathological situations (Reed, 2022).

Conclusions

All of these factors indicate suggestive, unnoticed sexual dysfunctions that impact a woman's life in several ways (social, emotional, cultural, among others). To alleviate the negative effects of a lack of perception of one's own body and a lack of knowledge and approach to female sexuality, it is essential that informative campaigns be carried out on sexual function, campaigns to encourage self-knowledge and perception, and greater research in the area by health professionals. In the literary search for the theme "sexual dysfunctions," existing studies are still scarce and not so recent, and within this vision of unnoticed dysfunctions, with a focus on the analysis of female perception regarding their sexual function as normal or pathological, there are no correlation studies, conrming the importance and need for more studies and approaches in the area.

References

1. Reed, M.A. Female Sexual Dysfunction. (2022). Clinics in Plastic Surgery, 49(4), 495-504. <https://doi.org/10.1016/j.cps.2022.06.009>