Wake up to sex at 50!

The first question that you may be asking is "Why 50?" The answer is that the magical age of 50 is associated with the menopause, and traditionally with being "past it", "over the hill", "long in the tooth", "not a spring chicken" and regarding sex, definitely "too old for that sort of thing!"

However, we now hear, time and time again that 50 is the new 30 and that life has never been better for those over 50 - they are healthier and wealthier than ever before.

So what is health?

Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease.

Sexual health means enjoying the sexual activity you want without causing yourself or anyone else suffering, physical or mental harm. There is some evidence that an active sex life helps to maintain physical and mental health.

For women in particular, many factors often affect sexual interest and response and hence sexual health. These include emotion, stress, tiredness, anger, worry, unresolved issues, privacy, fear of children hearing and hormone levels.

Of course, there are other reasons why a woman’s sexual interest may be affected - the gorgeous hunk of a man that she married 20 to 30 years ago may not have aged so well!

However, joking aside, it is very clear that oestrogen deficiency associated with the menopause adversely affects the lower genital tract causing vaginal dryness, irritation and discomfort, with the potential for reduced sexual satisfaction and an adverse impact on sexual health.

So do women feel that an active sex life at an older age is important, or would they rather have a cup of tea?

Are women continuing to enjoy an active sex life into older age or are they having problems and if so, are they seeking help or suffering in silence?

The results of 2 recent surveys go some way in answering these hugely important questions.

Firstly, research presented at the European Congress on Menopause in Istanbul in 2006, from a survey of more than 3,000 women aged between 50 and 60 from Britain, Belgium, France, Sweden, Switzerland and Italy, revealed that 80% felt that maintaining a satisfying sex life was important to them and their relationship with husband or partner. However, of the 600 British women, 3 out of 4 reported poor sex lives with 75% claiming that their sex drive had diminished with the onset of the menopause. Worryingly, women are not seeking help and are suffering in silence with one third of these women saying that they would never discuss their sex lives with a doctor.
These results are remarkably consistent with our online questionnaire on menopause matters.co.uk, which now receives more than 1,000,000 hits per month. With increasing use of the internet for health information, respondents to our survey are more and more likely to be representative of the general population. An online survey allows respondents to share their views more openly, freely, and anonymously than in a more formal clinical setting.

1018 women completed the questionnaire, several within half an hour of it going online! 78% of menopausal women aged between 50 and 60 felt an active sex life is either extremely or very important. Staggeringly, 58% of these women suffer from discomfort during intercourse.

49% of respondents felt less confident because of their symptoms and 26% even admitted to making excuses not to have sex because of the discomfort. The most frequently reported excuses were "too tired", "headache", and "not in the mood".

43% said that their symptoms had affected their relationship, yet, despite the huge impact of these symptoms, only 17% of those experiencing vaginal discomfort had discussed their problem with a doctor or nurse. Possible reasons for this include embarrassment, familiarity with health professional, not enough time, (the average time for a consultation with a GP is said to be 7.5 minutes!) sexual health not seen as a priority, and not seen as an illness.

With very effective, safe treatments being available, it is incredible that a massive 71.5% of those with discomfort were not using any treatment.

These results highlight that menopausal symptoms have an adverse impact on the sexual health of many women and that these problems are often poorly addressed, if at all! It is time that health professionals should ask women of all age groups about sexual health if they are consulting about menopausal symptoms, and opportunistically, for example, when women are attending for cervical screening the signs of vaginal atrophy are often apparent yet rarely discussed.

Further, public awareness should be raised to empower women to feel more able to discuss these issues with others. In conclusion, vaginal discomfort is a common symptom and frequently affects sexual health. However, only a very small proportion of those women with this symptom currently receive treatment - it’s time to change and wake up to sex at 50 and beyond!