

Porterbrook Clinic

Sheffield Care Trust

Sexual Growth **For Women**

Vulval Problems and Painful Sex

Information for Users of our service

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Are you a woman who sometimes experiences sex as painful?

There's nothing quite so misery-inducing as soreness or pain in the genital area. It can certainly spoil sexual enjoyment, or even prevent sexual activity altogether. Painful sex (which doctors call "dyspareunia") is common and can occur at any time, although likely times are:

- Early on in a woman's sexual life, when she is sexually inexperienced;
- After childbirth, particularly if the birth has been difficult and the perineal area has been traumatised;
- Around the time of the menopause, when lower oestrogen levels can cause the vaginal wall to become thinner and more fragile, and vaginal dryness is common.

The effects of painful sex

Pain during sexual intercourse frequently leads to problems in the relationship. When sexual activity is painful, this is likely to cause you anxiety, and anxiety and tension often lead to pain, setting up an unhelpful cycle. It is likely to decrease your capacity to become sexually aroused and make you less interested in being sexual. At the very

least, it is likely to make it more difficult for you to reach orgasm.

You may decide to press ahead and have sex anyway to please your partner, but unfortunately, doing something that hurts you is not generally a good idea, even if it makes your partner satisfied on that occasion. Afterwards, you might feel resentful, and he or she may feel uncomfortable or guilty at having hurt you.

Eventually, one or both of you may start to avoid sexual intercourse altogether, in order to protect against pain and guilt. This may cause tension and misunderstandings in the relationship. Over time, this can make you draw away from each other emotionally, causing further difficulties.

The obvious cause

The most everyday cause for sex being painful or uncomfortable for a woman is if she has intercourse before she is sufficiently aroused and lubricated. Women's physiological arousal is less obvious than a man's, and it's easy to forget that women often need a lot more foreplay to become fully aroused than men do (perhaps 15 minutes or more). Starting intercourse too quickly causes two problems:

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- 1 If she is not sufficiently lubricated, penetration can feel like a dry rubbing and this can lead to minor abrasions in the vaginal wall, which can feel sore;
 - 2 As a woman's arousal increases, the innermost part of the vagina balloons and the uterus and cervix are pulled upwards: if penetration takes place before this has happened, the man's penis is likely to hit the cervix, which some women find very uncomfortable.

Dryness in the vagina isn't always due to insufficient foreplay – there can be other causes, such as the contraceptive pill or the menopause. Most women need extra lubrication at some time, so don't think of using a lubricant as a sign of failure: when the skin on your face or legs is too dry, you apply a moisturiser, and this is just the same. It's not a sign of 'frigidity', lack of interest or not having a sexual body. In fact, many couples prefer to use a lubricant whenever they want to be sexual, finding that lubricants make sexual touch feel softer and more sensual.

If the lack of lubrication is caused by the menopause, this can be further helped by hormone replacement therapy (HRT) and/or a topical oestrogen cream.

What else causes sex to be painful?

There are many other factors that can make sex painful or uncomfortable.

Some women experience a spasm in the vaginal muscles, which makes any kind of penetration (even to insert a tampon or for a gynaecological exam) painful, difficult or impossible. If you think this might be the problem you have, ask for our leaflet "Overcoming Vaginismus".

If you have a painful condition that affects your whole body, this can also have an impact on your enjoyment of sex. For example, sex can become painful if your mobility is lessened through a condition such as arthritis or multiple sclerosis. Illnesses such as diabetes also result in an increased risk of sex being painful. If this applies to you, talk to your doctor about the possibility of using pain relief before sex to ease pain.

Other common causes of painful sex are focused more on the pelvic and genital area. You may feel aching, burning, stinging or sharp pain in the outer area of the genitals e.g. on the vulva (see diagram), further inside the vagina, or deep inside your pelvis. The pain may be there all the time, or you may only notice it during intercourse, or in particular sexual positions (such as during deep

penetration from behind).

Some possible causes of pain that is mostly felt in the outer genital area are:

- Lack of lubrication, which can lead to small cuts or tears if intercourse is attempted.
- An infection or other irritation such as a yeast infection (thrush), a urinary tract infection or herpes
- Chronic inflammatory conditions such as vulvodynia, vaginitis or vulvar vestibulitis (also known as VVS or vestibulodynia). These terms describe chronic vulvar discomfort or pain in cases in which there is no apparent infection or skin disease of the vulva or vagina. The pain may be characterized by burning, stinging, irritation or rawness, and may be continuous or intermittent.
- Skin complaints (just like those that can occur elsewhere in the body) such as eczema, warts, dermatitis, lichen sclerosis or psoriasis. These can cause the skin around the vulva to shrink, become fragile and tear easily.
- An allergic reaction to soap, talcum powder, condoms or spermicides or, ironically, to creams which you have been using to try to relieve the pain.
- Sore spots caused by a cyst, ulcer or an injury to the area.

Deeper, internal pain could be caused by:

- Gynaecological or other abdominal problems such as endometriosis, irritable bowel syndrome, fibroids, tumours or cysts
- The effects of abdominal or gynaecological surgery including nerve damage, or radiotherapy to the pelvis
- Untreated infections, which can spread and cause adhesions or Pelvic Inflammatory Disease
- An anatomical abnormality (i.e. an irregularity you were born with).

What should I do if the pain persists?

If you feel you are getting aroused and are using sufficient lubrication, but are still finding sex painful, there is a lot you can do. The first step is to get a medical investigation into what is causing the pain. Choose a family doctor with whom you feel comfortable, ask to be referred to a specialist service, or visit a genital-urinary medicine service (GUM Clinic): the address will be in your local Yellow Pages. It is often helpful if your partner can attend as well. It might be helpful to:

- keep a 'pain diary' describing when the pain occurs and how bad it is on a scale of 0-10

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- draw on Figure 1, on the inside back page, where the pain actually is and take these with you when you go to see the doctor.

Questions to ask your doctor or health professional might include:

- What is causing the pain in my vulva / vagina?
- What treatment can you offer me to decrease the pain?
- The pain is affecting my sexual relationship with my partner: what help is available?

If the doctor does find a physical cause for your pain, you will need to follow carefully any advice or treatment regime he or she gives you to treat the problem, until your doctor is satisfied it has cleared up.

Your doctor might also refer you for psychosexual therapy alongside the medical treatment. This can really help you and your partner to talk about the difficulties you have had, and find positive ways to overcome them. This service is available on the NHS here at the Porterbrook Clinic – ask to see our leaflet for more information.

What else can help?

Sometimes a specific physical problem cannot be diagnosed. What is more, it is not unusual for women to find that,

even after effective treatment of the underlying problem, pain persists. This may be due to a variety of reasons: sometimes vulval pain can result from a problem with the nerve fibres, which are invisible; and it could be that the problem you had previously has left a tender area, which is easily inflamed. This is because sensitised tissue sometimes reacts to the sensation of touch as though it were a painful stimulus.

If your doctor does not diagnose a specific problem and offer you medical treatment, or if your pain persists after the treatment is complete, **don't despair**: there are still plenty of things you can do to help yourself:

- It is possible to access private psychosexual therapy without a GP referral, although it is important to ensure that any sex therapist you see has specific recognised qualifications in sex therapy and that he or she abides by the ethical code of an appropriate professional body such as the British Association for Sexual and Relationship Therapy (see details below).
- A woman will often need to be able to enjoy touching her own body before she can feel comfortable with another person touching it. It is certainly helpful if she understands

and feels at ease with her own body, and knows how it works sexually. A psychosexual therapist can suggest exercises that can help you to become comfortable with your body, or you can find this kind of exercise in the books suggested below.

- Often, increasing your sexual excitement level, perhaps by using fantasy or a vibrator, can improve the blood circulation to the genital area and thereby decrease the level of pain.
- Massaging the vulval area for a few minutes each day can also help to encourage blood flow to the area. This promotes the healing of tissue damage, while also stimulating the deep pleasure sensory endings at the same time as de-sensitising the pain endings close to the skin's surface.

If you would like to try vulval massage, make yourself comfortable sitting in front of a mirror, and put some lubricant

on your fingers. Start by gently stroking the areas that are not painful, and then gradually start to include the more sensitive areas. Do not spend long on any areas that cause discomfort, but move away a little and continue with the areas that don't hurt. Over time, gradually increase the pressure on the areas that are not painful, so that you are massaging the deeper tissue and not just the surface. Extend this deeper stroking to the areas that are sore, as they become less painful. As you stroke your vulva, remember to breathe steadily and stay as loose and relaxed as you can.

Sometimes topical anaesthetics such as lidocaine cream can help, although these should be seen as a temporary measure as they do not get to the cause of the problem.

Remember that extra lubrication during all sexual activity will help touch to be experienced as a pleasurable sensation.





External Female Genitals Surface View



Figure above showing a female lying on her back with genital area highlighted

(Glans) Head of clitoris
containing receptive
nerve endings

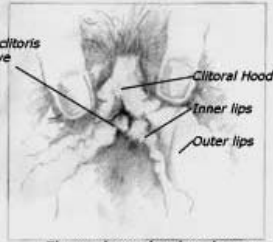


Figure above showing close up view of the clitoris with the hood pulled back

Pubic mound (Mons pubis)

Clitoris

Passage leading to bladder (Urethra)

Outer lips (Labium majus)

Inner lips (Labium minus)

Vagina

**Area between vagina
and back passage (Perineum)**

Back passage (Anus)

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Further information and resources

Support groups

A UK voluntary group providing information to women who suffer from vulval pain, and their partners - **The Vulval Pain Society**
www.vul-pain.dircon.co.uk

An American organisation for people with vulvodynia – **National Vulvodynia Association** www.nva.org

A UK based voluntary group for sufferers of lichen sclerosus: the **National Lichen Sclerosus Support Group** at www.lichensclerosus.org

The UK **Interstitial Cystitis Support Group** at www.interstitialcystitis.co.uk

Sex Therapy

To find a private sex therapist, contact the British Association for Sexual and Relationship Therapy (BASRT) on 020 8543 2707
www.basrt.org.uk

Lubricants

We suggest you use a water-based lubricant like the Durex Play range, Vielle, Liquid Silk, Astroglide, TLC and Sylk, or one of the new silicone lubricants such as Silicone Moist. You can purchase these from a larger chemist, or from an internet site such as www.fpsales.co.uk or www.beecourse.com, www.gash.co.uk or www.blushingbuyer.co.uk

Vibrators

There is also a much wider choice than ever of vibrators with some that resemble massagers or even objet d'art more than the traditional phalluses, although they do tend to be pricey. See for example the ranges at www.emotionalbliss.co.uk www.myla.com or www.durex.com/uk/play. For a more conventionally shaped vibrator, try for example the range by Fun Factory at www.sensualessentials.com or www.beecourse.com. These are made from silicone, which is soft, warm to the touch, hypoallergenic and easy to clean; they are also quiet and easy to operate.