Reproductive Facts

Patient fact sheet developed by the American Society for Reproductive Medicine



Sexual Dysfunction and Infertility

What is sexual dysfunction and how common is it?

Sexual dysfunction is a problem in a person's sexual desire, arousal, or orgasm. Sexual dysfunction is common. It affects as many as 30% of men and 40% of women. For couples dealing with infertility, it is even more common. Often, people ignore sexual problems, hoping that the issues will go away on their own or will not have long-term effects.

Some sexual problems may go away when the pressures of infertility treatment end. Others may linger or get worse after treatments end or a couple becomes parents.

Why is sexual dysfunction more common in couples with fertility problems?

Infertility treatments often create added stress- emotional, physical, and financial. Many require physically invasive procedures. These can affect a person's sexual self-image, desire, and performance. For many couples, making love is a way to connect emotionally. When their sex lives are associated with failure, frustration, anger, and resentment, they can lose this way of showing their emotions.

The pressure to perform, and to have (or abstain from) sex due to infertility treatment plans can push couples even further apart. Fertility attempts can make sex less spontaneous and less enjoyable. As sex becomes focused on baby-making, couples often stop lovemaking for pleasure. These issues can get worse as a fertility journey goes on.

Sexual dysfunction can take a large toll on emotional well-being. It can also increase the disappointment of not having children and the distress of medical treatment.

What happens with sexual dysfunction physically?

Sexual problems that interfere with intercourse and prevent conception can have a deep impact on couples. Problems in any of the phases of sexual response (desire, arousal, orgasm, resolution) as well as pain disorders may contribute to infertility. This may show up in several ways: not wanting to engage in sex (diminished libido), not being able to have or keep an erection (erectile dysfunction), problems with releasing semen (premature or delayed ejaculation), and vaginal muscle tightness that prevents intercourse (vaginismus).runt.

What happens with sexual dysfunction emotionally?

For many couples, sexual performance is affected by the pressure to have planned sex, pressure to perform on demand, extensive and painful tests, and anxiety. Other issues can include turning over control of such a personal aspect of life to a health-care provider. As infertility continues, feelings of sexual inadequacy and depression can occur due to the emotional link between sexuality and fertility. Many couples in infertility treatment say they avoid sexual intimacy during non-fertile times. Men and women can lose pleasure from sexual activity that isn't for baby making and may avoid sex or not care about having sex. This can lead to a loss of affection overall, and couples may feel tension or disconnected.ut vellatur?

Is there any way to treat these issues?

Depending on how they are affected by these problems, some couples will want to seek medical help for sexual dysfunction. Others will benefit from counseling or psychological support. A combination approach may prove the most helpful strategy. Sex therapy and medications are often the best treatment approaches for physical and emotional issues. The most important factor in treatment is the couple's willingness to reach out and ask for help, vellatur?

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Summary

Sexual dysfunction can affect anyone at any time but is especially common in couples struggling with infertility. It is important for couples undergoing treatment for infertility to be aware that some type of sexual dysfunction is common. Being willing to accept support when it is needed can help couples keep the intimacy of their relationship during this challenging time and afterwards.

Strategies to help:

- Focus on your relationship as a couple (not just parentsto-be).
- Talk about sex.
- Face your sexual challenges as partners.
- Do it anyway! Sex encourages intimacy.
- Make time for lovemaking, not baby making.
- Plan sexual activities that are playful, enjoyable, or interesting, especially during non-fertile times.
- Find alone time for the two of you.
- Play together...whatever that means to you.
- Devote time to activities and interests that you enjoy together.
- Don't let infertility be all you do or talk about.
- Know that your fertility does not define you.
- Know that sexual challenges during this time are normal.
- Seek help and know you are not alone.

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