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Objective: to assess the impact of genitourinary syndrome (GSM) on sexuality among menopausal women.

Design : we conducted a prospective descriptive study

Method : we included in our study all the menopausal women visiting our outpatient clinic . A self administrated survey was delivered: women should precise if they still have sexual activity , if not , the reasons of sexual abstinence were mentioned.

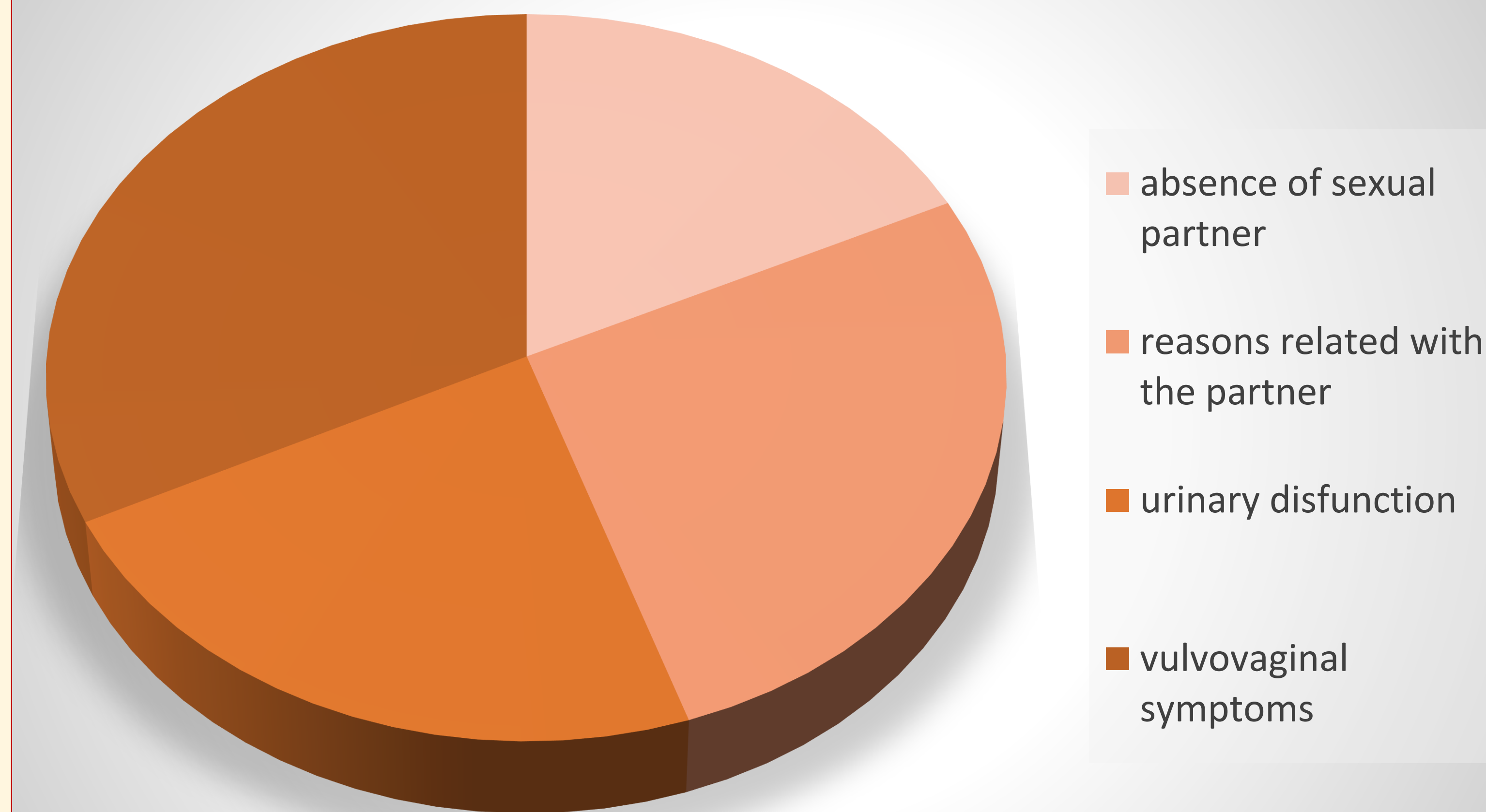
Results : four hundred twenty seven patients answered our survey . The middle age was 60.4 years old (between 55 and 78 years old) .

The absence of sexual activity 6 months before was revealed in 44.5% of cases . The main reasons were :

- absence of sexual partner in 13.3% of cases
- reasons related to the partner in 20.1% of cases (physical incapacity – absence of desire)
- urinary dysfunction in 17% of cases (urinary incontinence or urgenteria)
- vulvovaginal symptoms such as itching ,burning in 25.9% of cases and dyspareunia in 24.1% .

Among women sexually active , 45% complained of dyspareunia and 7% of urinary incontinence . for those who do not use lubricant , 37% of women reported vaginal dryness .

Absence of sexual activity reasons



Discussion :GSM has been shown to negatively sexuality, relationships, and life quality(QoL) ; as demonstrated in various surveys.(1,2,3)

The international VIVA survey(1) involved 3,520 postmenopausal women from 7 countries and found that 45% of women experienced vaginal symptoms.The majority of women (75%) indicated that vaginal atrophy negatively impacted their lives, especially sexual intimacy (64%), loving relationship with a partner (32%), overall QoL (32%), feeling healthy (21%), and feeling attractive (21%)

Similarly, the CLOSER survey(2) included 4,100 women, between 55 and 65 years with a history of vaginal atrophy, from 9 countries .Main effects of vaginal atrophy were avoiding intimacy (62% of women), fewer sexual encounters (58%), less satisfying sex (49%), and putting off having sex (35%)..

The authors stated that clinicians can improve QoL related to sexual functioning by managing GSM symptoms(3.4).

Conclusion :The management of GSM is increasingly important in light of improving quality of life in menopausal women. Early recognition of signs and symptoms of GSM, individual counseling and personalized treatment strategies are key-steps in helping women to maintain their sexuality .

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