LOSS OF LIBIDO:
Or, What Happened to My Sex Life?

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A common scenario with a patient in my office occurs just as we are wrapping up a routine annual gynecologic exam. After discussing routine preventive health issues, the patient will say, “Oh, and I just want to mention that my sex drive is practically non-existent. Should I get my hormones checked?”

If your sexual drive, or libido, has been lacking in recent years, you are not alone. Nationwide, 40 percent of women complain of sexual problems, the most common being decreased desire. In my practice, a patient will ask me to address this issue directly at least once a day. This is an incredibly common problem that leads many women to the doctor’s office to seek a “hormone check.” If only a shot of testosterone was the answer!

The problem goes way beyond our hormonal state and beyond the physical mechanisms of arousal. However, testosterone treatment and drugs for erectile dysfunction are much more effective for treating men than women. Research has shown that female libido is more influenced by social and cultural factors than that of men, and female sexual inclinations have been shown to be more complicated than that of men. That said, there are many common factors.

It’s true that a coordinated interaction of reproductive hormones, including estrogen, progesterone, and testosterone are important to arousal and sexual pleasure in both sexes. However, when women with low libido were studied in large numbers, no difference was found between their levels of estrogen and testosterone and those in women who reported a healthy sex drive. This means that measuring levels of these hormones is just not useful, and this applies to men as well as to women.

In a very large recent study, the two factors most associated with a low or absent libido were depression and children living at home. There is a very strong link between depression and diminished sex drive, and this link is equivalent in both men and women. It would make sense that your sex drive would suffer if you do not feel happy, energetic, or motivated. Treating depression can often bring back a healthy libido, which has led researchers and sex therapists to turn to addressing our most powerful sexual organ: the brain.

Lori Brotto Ph.D., a sexual health researcher in Vancouver, B.C., states “If we are thinking about other things, we don’t react to the subtle messages our body sends to show it’s turned on, like the rush of blood to our genitals, the increased lubrication and heightened sensitivity.” Instead of listening to these subtle messages, we are concerned about those phone calls that need to be returned, getting the kids off to school, returning that important email to a client, getting the oil changed, etc. Both women and men at any stage of life can be overextended. Working full time as many of us do, running a
household, trying to squeeze in exercise, give back to our kids, and walk the dog can take a dramatic toll on emotional and physical energy.

Since stress management is critical to mental health, it makes sense that sex and exercise are linked in the complex web of the human sexual drive. Stress management is critical to handling the kids, money, anxiety, job, spouse, parents, boss, and to staying happy and peaceful in the middle of all the chaos. A great way to reduce stress is with exercise and communing with nature, which are easy access here in the beautiful Tetons. Exercise not only reduces stress, it helps us feel better about our bodies. A healthy body image is important to a healthy sex life: putting on those extra pounds just doesn’t help anyone feel sexy. It is amazing how experiencing one’s body through exercise, in addition to improving body image, can help connect with the sexual self as yet another of life’s sensual pleasures.

As stress and anxiety accumulate, and coping/stress management ability declines, having sex with our partner can become just one more thing on the laundry list of life. Once the brain begins to orient towards sexual intimacy in this way, it requires a real and often difficult conscious effort to re-program the brain to view sex as a gift to be embraced rather than as one more obligation.

Making this conscious effort to re-orient one’s attitude toward sexual intimacy is difficult in a society where movies and pop culture tell us we should want sex all the time and have it whenever we want. We are bombarded by the media with this message: “If you don’t want sex all the time, there is something wrong with you.” But anyone reading this article could honestly admit that this just isn’t reality! To jump start one’s sex life, it is critical to step outside of “feeling” and into conscious awareness. Exercise, as I mentioned already, can help bring us into this space, as can mindfulness of physical sensations such as touch, taste, smell, and the physical being of our partner. I find in addressing this issue with women that once the conscious effort is made, as unnatural as it can feel initially, “the more you have, the more you want.”

“As you become more aware of your body over time, you strengthen the neural pathways that associate sex and fun in your mind and make you much more likely to look forward to future encounters,” says Sylvia Rosenfeld, a sex and relationship therapist in New York City. “Mindfulness helps us stop worrying and focus instead on physical sensations, such as feeling our partner’s skin against our own.”

Another important factor affecting libido for both men and women is emotional intimacy. If intimacy with your partner is lacking, sexual desire is sure to suffer. Taking a close look at your relationship is often the first of many steps to improving sex drive, and emotional intimacy is a direct conduit from the brain to the genitals. Some couples can improve intimacy without help, but a great therapist or counselor can help target specific issues and get you into a space where sexual intimacy thrives. Even small, mindful attempts to improve communication with our partner can make a huge difference. The hard part is that it requires that conscious effort that no one in the movies seems to need.
to make. In spite of the inertia that we feel in the midst of busy lives, it is very worth it to communicate in an intimate way with our partner on a daily basis.

Simply altering the time of day for sex can be a huge boost. Most of us are pretty exhausted when we fall into bed for the evening. Even though this is the classic slice of available time for many couples to have sex, it is also the time of day when we are all the most tired—meaning that this is also the time of day when sex feels unnatural, non-intimate, and like the day’s final chore. Daytime sex, while it requires some planning, can overcome this and is a great way to start being conscious and present with the sexual act. If fatigue is not an issue, what better time to focus on your partner? Many couples will say that organizing a mid-day interlude is just not possible. With a bit of planning and focus, put everything on hold for just 20 minutes and focus on your partner and on your body. It also feels somewhat illicit and exciting to have daytime sex, and who couldn’t use a bit of excitement in their sex life?

Another problem with the influence of pop culture is that it causes unrealistic expectations. We all experience our sexuality differently at different stages of life, and a “normal” libido is a unique reality for each individual. Read on for S.M.’s thoughtful and insightful viewpoint in this regard:

“I guess that what I have found to be truly the best therapy is to start feeling comfortable, for the first time in my life, with myself, my body, my hubbie; instead of always seeking something better…which leads to disappointment. That’s the good thing about mid-life: accepting reality and feeling good about it. And now that you mention it, that’s one of the hardest ‘conscious efforts’ I’ve ever been through….”

A discussion about loss of libido would be incomplete without addressing the changes that occur in women with menopause. During the menopausal transition, the production of estrogen and progesterone from the ovaries begins to decline, often over the course of several years before reaching a final low steady state. Not every woman experiences menopause in the same way, and most recommendations cannot be generalized. However, many women will have pain or discomfort with intercourse secondary to the effect of estrogen depletion on the vaginal tissues, which makes this area more delicate and prone to trauma. Topical hormone creams and emollients can improve this problem, and I prescribe an entire hormone and physical therapy program to women with this issue and involve their partners in treatment.

Perhaps the most important way to maintain the health of the genitalia with aging is just to have more sex. Once a menopausal woman experiences pain with intercourse, a pain cycle begins that leads to less sexual stimulation and less desire. Intercourse itself keeps blood flow active to the vagina and prevents constriction of the vaginal opening. It is literally a “use it or lose it” situation! The treatments I mention above along with active pursuit of intercourse will almost always solve the problem.

Aside from the physical changes in the genitalia, there are menopausal women who experience a profound loss of libido as their ovaries begin to shut down. Pharmaceutical
grade hormone replacement can help these women, and there is also data with regards to low dose testosterone treatment that can make a difference—though as I mentioned earlier, this does work somewhat better for men than for women. The alternative medicine and herbal world also has become an increasingly popular option for menopausal women seeking treatment. Women interested in these treatment options should address these options with their health care provider, knowing that the brain cannot be left out of the equation!

As anyone who uses the Internet knows, there are literally thousands of sexual devices, herbs, treatments, “hormones,” and other products advertising “sexual enhancement” that are untested and unproven. They are also often expensive, not helpful, and occasionally unsafe. Men and women both should consult their health care provider before pursuing treatments of this nature!

Aside from the loss of hormonal function, do our libidos “naturally” decline as we age? It is difficult to generalize, but I do believe that for many couples the change that occurs is in the frequency and type of sexual interaction rather than a decline in its importance. For many men, maintaining an erection becomes difficult with the onset of cardiovascular disease or the use of certain medications. Contrary to the popular belief that “older women just don’t want to have sex,” many of my menopausal patients are having less sex because of these issues with their male partner.

For both elderly men and women, sexual intercourse can be limited by illness, disability, and orthopedic problems. Often these couples will initiate other types of sexual or physical intimacy, such as oral sex, that they find just as fulfilling as intercourse. Many of my elderly patients continue to have an active sex life, though they will admit that it does not happen as often as when they were in their 20’s! It is incredibly inspiring that sexual intimacy is experienced by loving couples of all ages.

Conscious awareness and mindfulness are part of a holistic approach to the loss of sexual desire. Whether the problem stems from stress, poor body image, depression, poor health, a lack of intimacy with your partner or the proverbial headache, taking an active and conscious approach can get the sexual juices flowing. Getting a trusted health care provider or therapist to help overcome the initial inertia of making positive changes can be a major boost. There is no “magic hormone pill” that will address all of these issues!