



For Women
For Health, For Menopause

“I’ve gone off sex, will HRT help?”

GP and menopause specialist Dr Jane Davis explains how to recognise and treat female sexual dysfunction and symptoms of genitourinary syndrome in women going through menopause.



Intended learning outcomes:

By the end of this animation and accompanying PDF, in relation to menopause, the primary care clinician will be able to:

- Recognise symptoms of genitourinary syndrome of the menopause and female sexual dysfunction.
- Determine when genital examination is recommended.
- Appreciate the role of systemic and vaginal menopause hormonal therapy.
- Formulate suitable management plans for low libido at menopause.

Remember – When conducting a remote consultation by telephone or video:

- Check the line – Can you hear me? See me okay?
- Check identity – Name and date of birth.
- Assure confidentiality.
- Check patient is in a suitable place to talk.

Q: “I’ve gone off sex, will HRT help?”

A: Loss of libido (sex drive) is a common problem that affects many men and women at some point in their lives. Loss of libido has a number of possible causes, such as relationship problems, lack of sleep, or stress. It can also be linked to the fluctuations in hormone levels caused by menopause.

REFERENCES:

- 1 <https://www.nhs.uk/conditions/loss-of-libido/>
- 2 <https://www.nhs.uk/conditions/menopause/symptoms/>
- 3 <https://www.nhs.uk/conditions/loss-of-libido/>
- 4 Menopause: diagnosis and management (nice.org.uk) 1.4.8
- 5 Angelou K, Grigoriadis T, Diakosavvas M, Zacharakis D, Athanasiou S. The Genitourinary Syndrome of Menopause: An Overview of the Recent Data. *Cureus*. 2020 Apr 8;12(4):e7586. doi: 10.7759/cureus.7586. PMID: 32399320; PMCID: PMC7212735. <https://pubmed.ncbi.nlm.nih.gov/32399320/>
- 6 Naumova I, Castelo-Branco C. Current treatment options for postmenopausal vaginal atrophy. *Int J Womens Health*. 2018;10:387-395 <https://doi.org/10.2147/IJWH.S158913>
- 7 Menopause: diagnosis and management (nice.org.uk) 1.4.9

This resource has been produced by primary care medical professionals on behalf of Theramex. Remember this is guidance and to please use your clinical judgement on a case-by-case basis.



Although a loss of sex drive is not inevitable as we age, many people may experience it. Around the time of menopause, it's very common for women to experience difficulties with losing interest in sex. This is due to a number of reasons, including:

- Lower levels of the sex hormones estrogen and testosterone¹.
- Vaginal dryness, a symptom of the menopause which can make sex uncomfortable and/or painful (dyspareunia).
- Other perimenopausal symptoms such as hot flushes, night sweats and insomnia.

The brain effects of menopause can often go together with the loss of sex drive².

Hormone replacement therapy (HRT) may help women going through the menopause to rediscover their libido³. Although the use of testosterone is not licensed for women in the UK, NICE states "Consider testosterone supplementation for menopausal women with low sexual desire if HRT alone is not effective"⁴. Other estrogen treatments can also help to alleviate vaginal dryness, making sex more comfortable.

Getting HRT right helps to balance hormones and brain chemistry. Settling menopausal symptoms may be enough to increase your patient's desire to have sex, because they feel generally better.

Vaginal dryness

Vaginal dryness is very common in women of menopausal age, though women may tend not to report it. It is technically called vaginal atrophy or genitourinary syndrome of the menopause⁵. The vaginal tissues are very estrogen dependent, and vaginal atrophy can occur with the loss of estrogen in these tissues. About 75% of people find their symptoms improve with HRT⁶.

Recommend that your patient uses an oil-based lubricant (as long as they're not using condoms) every time they have sex. This acts as a barrier and can help to prevent any soreness. Some women need vaginal treatments as well as HRT, and this can come in the form of estrogen, taken as creams, gels, rings or pessaries⁷. In moderate to severe symptoms some women may use dehydroepiandrosterone (DHEA) treatment.

Checklist – any of the following may warrant further investigation:

- Have you ever had any bleeding after sex?
- Are you at risk of an STI?
- Is your smear up to date?
- Do you have any itching, lumps, or skin changes in your vulva or vagina?
- Any changes in vaginal discharge?
- Bladder problems?

REFERENCES:

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