Female Sexual Dysfunction in Multiple Sclerosis: A Review

Per Olov Lundberg, M.D., Ph.D. and Birgitta Hulter, R.N.

Changes in sexual functions are very common among women with advanced multiple sclerosis but occur also in early and mild cases. Decreased sexual desire as well as decreased or absent lubrication are almost as common as diminished orgasmic capacity, changes in orgasmic quality or anorgasmia. Changes in sexual functions correlate both to neurological symptoms from the sacral segments, such as sensory dysfunction in the genital area or weakness of the pelvic muscles, and to bladder and bowel dysfunction. However, disability in itself and a number of psychological and social factors may explain the problems but also gives clues to the treatment.

KEY WORDS: multiple sclerosis; female; libido; lubrication; orgasm.

INTRODUCTION

Multiple sclerosis is characterized by a widespread occurrence of lesions in the central nervous system giving rise to disseminated neurological symptoms. The early symptoms are often very mild. Typical clinical symptoms are visual defects, localized sensory symptoms such as numbness, paraesthesiae and dysaesthesia, weakness or loss of control over limbs and incoordination. Manifestations of the disease are often followed by conspicuous improvements so that remissions and relapses are the striking features of the disorder. In many cases the later clinical picture is one of progressive disability. Multiple sclerosis strikes individuals in the prime of life between the ages of 20 and 40 years, more often women than men. Prognosis is uncertain, a factor that is most stressful, as neither the patient nor the physician can predict whether the patient will remain mildly affected, or will be confined to a wheelchair or even bed-ridden.

Address correspondence to P. O. Lundberg, M.D., Ph.D., Department of Neurology, University Hospital, Akademiska sjukhuset, S-751 85, Uppsala, Sweden.

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FREQUENCY OF SEXUAL DYSFUNCTION

Almost all patients in advanced phases of the disease suffer from sexual dysfunction. In a study of 134 females (1) it was noticed that sexual life had changed for 72% of them. In 53 of the women with unsatisfying or extinguished sexual life loss of orgasm was notified as the main problem by 33% of the women and loss of libido by 27%. Similar figures were reported in other investigations (2-5). In a recent study changes in sexual functions in 47 women with advanced multiple sclerosis were described in more details (6). Twenty-eight (59.6%) of the women reported decreased sexual desire and seventeen (36.2%) decreased lubrication. Five (10.6%) further women did not know if they lubricated or not. Eighteen women (38.3%) reported diminished orgasmic capacity, and six (12.8%) further women had never had an orgasm. Sensory dysfunction in the genital area was experienced by 61.7% of the women and 76.6% had weakness of the pelvic muscles.

SEXUAL PROBLEMS IN EARLY AND MILD CASES OF MULTIPLE SCLEROSIS

Sexual dysfunction is common even in early and mild cases of multiple sclerosis. It may be the presenting symptom. In a study of 25 females aged 20-42 with a low handicap score (grade 1-2 on a 6-grade scale) sexual problems were reported by 13 of the women (7-8). Sensory symptoms seemed to be the most important reason for sexual dysfunction in these women. None of the 13 women had suffered from any sexual problems before the start of the multiple sclerosis. Nine of them complained of decreased libido and 9 had difficulty in achieving orgasm. Because of severe external dysaesthesia three patients reported that during a certain period they could not bear direct genital contact from their partner. Five other women had vaginal dyspareunia. Three further women complained of lack of vaginal lubrication. Some of the women were able to achieve orgasm despite intensive sensory symptoms. The sexual symptoms began in most cases rather abruptly. The dysaesthesia was of a maximum intensity from the beginning of an episode of neurological symptoms, but disappeared fairly rapidly as is usual in multiple sclerosis.

SEXUAL DYSFUNCTION AND BLADDER/BOWEL DYSFUNCTION

Since corresponding parts of the autonomic nervous system are subserving urinary and genital functions, bladder problems such as urgency and incontinence are fairly common in women with multiple sclerosis suffering from sex-