



By Dr. Sandi Altman

As a gynecologist, I have spent the last 20 years "listening" to my patients. Since my practice is focused on gynecology and mature women, versus obstetrics, I have listened and learned from my patients about the many challenges associated with women's health care, especially in the area of hormonal and menopausal issues.

As I listen to my patients, I sense in them the confusion and disappointment as they lose interest in sex or no longer feel desirable. Quite often, my patients wonder...what happened to those tingly feelings, that sensation of love and romance and the associated rush of sexual desire? Where did it go? What happened to my libido?

I have found that when women complain about lack of libido, it usually means that sex hurts because of vaginal dryness. Quite often, it also means that there is a lack of romance. The first is easier to fix, and essential, so let's start there.

First Things First

Looking at the clinical nuts and bolts, it's really not surprising that there is a loss of libido as we age. Vaginal dryness sets in, intercourse is painful because it feels like sandpaper, and it takes forever to reach orgasm (if at all). It really doesn't seem worth it. In addition to the pain, there is minimal genital sensation, and for all your effort, you often get a yeast infection. Who, on earth, would pursue this activity?

As an advocate for women's health, I believe that every woman deserves to enjoy the second half of her life without the debilitating symptoms of menopause. With the access we have today to medical information and specialists, that is very possible.

So the first step is to fix the vagina. The vagina is estrogen dependent tissue, and bad things happen when we lose that estrogen. In addition to dryness, as we age, the tissue loses elasticity.

Put the Zip Back in Your Doo-Dah!

Has anyone seen my Libido?

Instead of stretching during love making, the vaginal tissue burns, tears and can even bleed. Diminished blood flow not only makes reaching orgasm slower or impossible, but also numbs the sensory nerves of the vulva making the sense of touch less effective. The final insult is the change in the vaginal pH that leads to an increase in vaginal infections.

There is good news however! This is one of the easiest problems to solve as a gynecologist. Two weeks of topical estrogen can turn any vagina back to age 35! There is no reason to suffer. Besides estrogen creams, there are vaginal tablets (Vagifem) and a vaginal ring (Estring). These are not systemically absorbed. The only effect is on the tissues they touch, which helps to restore local estrogen. These products are available with a prescription. Over the counter lubricants can improve dryness, but only estrogen really makes the tissue young, healthy and resilient again.

So that's one definition of "loss of libido." The second definition has less tangible, and definitely less clinical challenges associated to it. Lack of romance. Plain and simple. So now what?

Next...Romance

Let's start by looking at, and accepting the obvious. Men and women are different. Frankly, we wouldn't want it otherwise. We just need to learn to work with, or around those differences. We learn to do so in many other areas of our lives, so why not in the area of libido levels?

If men want sex, they need to understand women need romance. But there must be communication. Women must tell men over and over again what it is that constitutes romance. And then tell them again.

One patient admitted she had not told her husband she wanted more romantic gestures. Why? Because, she said, if you have to tell him, then it doesn't count. Women want spontaneous flowers, not ones that show up because we asked for them.

As I learned in *The Female Brain* by Dr. Lorraine Brizendene, men just don't think like women do and to be fair, vice versa. If women wait for men to spontaneously guess our romantic desires, hell will probably freeze over first.

Sometimes, you just have to make your own romance, like having an affair with your husband. What would you do if you were having an affair? Maybe you'd sneak off to a hotel in the middle of the day. So do it with the guy you married. Take him out to dinner or get room service in the hotel room. On a Saturday afternoon call him from the hotel and tell him to meet you in room 206.

Don't forget to do a little lingerie shopping first. You'll get a romance high from the planning and he'll float five feet off the ground for weeks from being wanted. Then tell him that the next adventure is up to him, or plot together.

Many women, and men, feel their relationship is the only one experi-

encing problems and frustrations when it comes to the bedroom and libido levels. So perhaps the following statistics will put a lot of minds at ease.

Studies show that only four percent of pre-menopausal women in their 30's and 40's have spontaneous sex thoughts once a week. Forty-three percent didn't have a sexy thought once all month. And, while newlyweds have sex, on average, 10-12 times a month, after seven years of marriage that couple is down to three to four times a month.

Men and women can either retreat to their corners and pout because their partner isn't reading their mind and giving them what they want without having to be asked; or we can start a new dialogue and put our egos aside. As Gail Sheehay says in *The Sexy Years*, we get 30 bonus years. Wouldn't it be more fun to enjoy them together?

Estrogen + Romance = Zip

And today, more than ever before, those 30 bonus years are easily available. Looking for and rediscovering our libido involves both hormones and the relationship. With the use of vaginal estrogen you can "clinically" jumpstart your libido. Add to that communication and a willingness to work with the natural differences between women and men... and bingo...you'll put the zip back into your doo-dah!



"The Menopause Maven"

Dr. Sandi Altman

Dr. Sandi, aka The Menopause Maven has been in high demand as a speaker and teacher on menopausal and hormonal topics since 1992. She inspires and empowers women with cutting edge information and employs humor and candor to demystify menopause. Dr. Altman provides custom keynotes, break out sessions and educational workshops.

Dr. Altman has been a Board Certified Ob-Gyn since 1985 and is a fellow of the American College of Obstetrics and Gynecology. She received her B.A. from Tufts where she graduated cum laude and her M.D. from Boston University Medical School. She has been in private practice since 1983 with a special emphasis on a woman's transition through menopause.

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