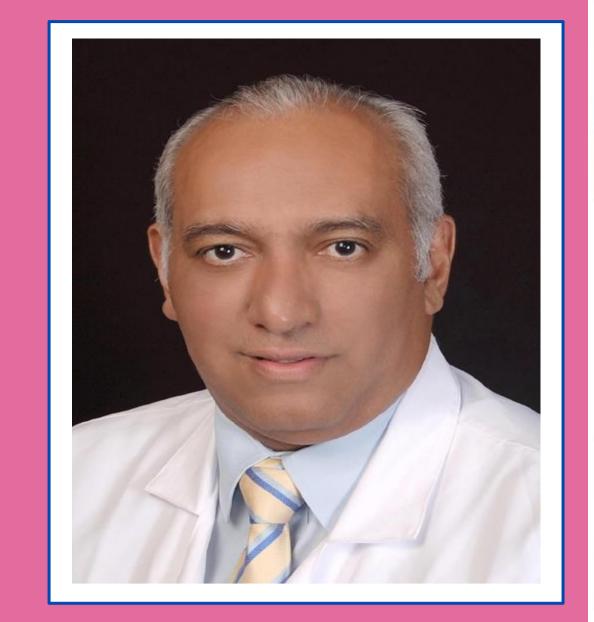
Factors Associated with Sexual Disorders in Colombian Climacteric Women: A cross-sectional Study

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INTRODUCTION & AIM

In women in the climacteric vital stage, the magnitude of the different sexual disorders must be identified. The prevalence of sexual dysfunction in climacteric women is different according to personal, biological, psychological and social factors

Objective: to identify factors associated with sexual disorders in Colombian climacteric women using The Female Sexual Function Index, abbreviated version [FSFI-6]

MATERIALS & METHODS

Cross-sectional study that is part of the **CAVIMEC** project [Quality of life in menopause and Colombian ethnic groups]. Healthy women, aged between 40-59 years, residing in urban or rural areas of the Colombian Caribbean, were invited to participate and were surveyed in 2019, face to face in their own residences by nursing assistants. They filled out a form that questioned sociodemographic characteristics and applied the FSFI-6 scale to identify sexual dysfunction and disorders of desire, arousal, satisfaction, coital pain, lubrication, and orgasm. The lower the score for each item and the scale, the worse sexuality. Anonymous, confidential and voluntary participation. For data analysis, EPI-INFO 7 was used. Unadjusted logistic regression was performed: dependent variable sexual dysfunction and each of the sexual disorders, independent variables sociodemographic characteristics. a value of p<0.05 was considered significant. Study approved by the ethics committee of the University of Cartagena, Colombia.

RESULTS

1445 women were studied, mean age
47.5±15.5 years, 39.5% premenopausal,
26.9% in transition to menopause and a
third postmenopausal

The IFSF-6 scale score was 15.4+9.5 Dysfunction was identified in 37.7%

The third part presented alteration of lubrication, quarter alteration of orgasm, 21% alteration in desire, a fifth part had alterations in arousal or coital pain and 14% manifested alteration in satisfaction

Frequency of disorders Sexual female **ALTERATION** N (%) [RI] 307 (21.2) [19.2-23.4] Desire 282 (19.5) [17.5-21.6] Arousal Lubrication 429 (29.6) [27.3-32.1] 373 (25.8) [23.6-28.1] Orgasm 206 (14.2) [12.5-16.1] Satisfaction 270 (18.6) [16.7-20.7] Pain **Sexual Dysfunction: 37.7%**

FACTORS ASSOCIATED WITH SEXUAL DYSFUNCTION

Workers	OR: 3.90 [95% CI: 1.6-9.4]
Widow	OR: 5.71 [95% CI: 2.0-15.9]
Mestiza	OR: 1.88 [95% CI: 1.4-2.4]
Without a stable partner	OR: 4.45 [95% CI: 2.7-7.3]
Coffee consumption	OR: 1.33 [95% CI:1.0-1.6
Current smoking	OR: 2.65 [95% CI: 1.6-4.2]
Post menopause	OR: 3.63 [95% CI: 2.8-4.7]



- The age range 55-59 compared to 40-44 was associated with a higher probability of sexual dysfunction and the six sexuality disorders explored by FSFI-6 < 0.001)
- The same was observed with daily coffee intake, smoking, post menopause and lack of a stable sexual partner (p<0.001)
- The lack of studies was associated with sexual dysfunction OR: 1.87 [95%CI:1.1-3.0], p=0.011
- Overweight and abnormal weight status were associated with a greater presence of desire and lubrication disorders (p<0.001)
- Performing activity outside the home was associated with a lower frequency of all disorders (p<0.01)
- Being mestizo with respect to Afro-descendant was associated with a greater presence of all sexual disorders (p<0.0001), except orgasmic disorders

CONCLUSION

Several factors: educational, ethnic, nutritional, work and habits, were associated with dysfunction or with other disorders of sexuality.

It is recommended that, during the climacteric, sexuality disorders be addressed, and sociodemographic and personal factors be considered

Website of the Women's Health Research Group



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