

Sexuality and chronic kidney disease

■ Let's talk about it

Sexuality is a vital part of us all. It includes many aspects such as how we feel about ourselves, intimacy, and how we communicate with others. Sexuality involves a range of activities that may or may not include intercourse, touching, hugging and kissing, holding hands and talking.

Over half of all people with chronic kidney disease experience some problem with sexual function. This can vary from just a lack of interest to a complete inability to reach orgasm. For many people, this can have a devastating effect on their self-esteem and put further stress on an already stressed intimate relationship. Talking with one's partner or the healthcare team about sexuality, orgasm, or sexual problems may cause feelings of embarrassment. Because these topics sometimes make us feel uncomfortable, many people choose to ignore the problem. *Whatever the cause or difficulty, sexual problems can often be corrected.*

This brochure is meant to help you understand some the causes of sexual problems related to chronic kidney disease, identify where you can go for help, suggest some things you can do for yourself, and provide a list of questions to help you talk to your doctor or other member of your healthcare team.

■ Causes of sexual problems

Fatigue

Fatigue is a major factor. Any chronic illness is tiring, and chronic kidney disease, which is often accompanied by anemia and a demanding treatment, practically guarantees fatigue.

Depression

Depression is another common issue. Almost everyone experiences periods of depression, and one of the symptoms of depression is loss of interest in sexual intimacy.

Medications

Medications can also affect one's ability or desire to have intercourse. Since there may be other medications which are just as effective without the side effect of loss of sexual function or desire, talk to your doctor about your pills.

Feelings about body image

Having a peritoneal catheter, or a fistula or graft, may cause some people to avoid physical contact for fear of feeling less attractive or worrying about what people think when they look at them.

Diseases

Some diseases, such as vascular disease and diabetes, can lead to decreased blood flow in the genital area, decreased sexual desire, vaginal dryness and impotence.

■ How can I get help?

The most important thing is to feel comfortable discussing your problems. Talk to the member of your healthcare team with whom you feel most at ease – your doctor, social worker, nurse or pharmacist.

- The first step is a medical review to determine if the problem is physical.
- You may also be referred to a social worker, psychologist, psychiatrist, nurse specialist or sexologist to look at non-medical factors.
- Assessment is often followed by counselling and education.
- Learning how to speak more openly with your partner is essential. By clearly expressing your personal needs, you can often reduce anxiety and improve your feelings about your sexuality.



For men

Common concerns may be erectile dysfunction (problems achieving or keeping an erection), reduced sexual desire (low libido), and ejaculation issues. Treatment options may include counselling, penile implant, male hormones, oral medications or those which are injected. Ask your doctor for a referral to an *erectile dysfunction specialist* for a complete evaluation including a review of your medications.

For women

Women may also experience decreased libido. For those who have problems with vaginal dryness, a number of options are available: creams or devices that contain estrogen can be put into the vagina; lubricants can also be used. In addition, regular sexual stimulation in any form helps improve vaginal moisture. Talk to your partner about your needs.