Let’s Talk About Sex – Senior Sex, that is...

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A Personal and Professional Journey

- While a MSN student at VUSN
  - Worked with the Associate Director of Vanderbilt’s Women’s Center on developing a Sexuality Series for undergraduates
  - We recognized a need for more in-depth education for young men and women, many of who had received “Abstinence Only” programs in their high schools
  - Topics included: physiology/biology of sex and sexual activity, cultural perceptions of sexual norms, communication with your partner, virginity, pleasure, birth control, and a panel discussion.
A Personal and Professional Journey

- Encountered resistance from an administrator, when asking to publicize this “Sexuality Series” at the School of Nursing, who regarded this information as “inappropriate” for MSN students!
- If the nursing model of health care emphasizes “Wholism”, can we ignore issues of sexuality and sexual health?
- We perpetuating ageist attitudes if, as HCPs, we deny the older adult’s need for knowledgeable, non-judgmental and current health care information on sexual health.
Personal and Professional Belief

- The average life span of the older adult is being extended and “active living” includes emotional and physical expressions of connection with others.

- What is lacking is societal acknowledgement that sex, sexuality and the need for physical intimacy does not precipitously disappear after people enter their 6th decade of life. (Nay 1992; Spector & Fremeth, 1996; Kaas, 1972)
Demographic Data on Older Adults – Present and Future

- In 2003 - 36 million or 12% of U.S. population ≥65 years old
- In 2030 – 71.5 million or 20% of U.S. population ≥65 years old
- In 2003, the number of U.S. women on HRT declined from 42% to 28% after WHI published their report in 2002.
- AARP “Sexuality and Maturity” 1999 – 43% of men and 35% of women aged ≥55 reported having sex at least once a week.
- 5% of people age 65 and 20% of those over 85 will spend time in a long term care facility
- In a study of 15 SNF in Texas, w/ mean age of 82 years, 81% of men and 75% of women reported sexual desire, but were currently sexually inactive because of lack of opportunity. (Hajjar and Kamel, 2003)
American Psychology Association
Ageist myths:

- Increasing age brings about greater psychological distress.
- Older adults are more depressed than younger adults.
- As individuals reach old age, they become preoccupied with memories of their childhood and youth.
- Older adults are less satisfied with their lives than younger adults.
- Older adults are alienated from the members of their families.
- Because older adults generally do not reside with their children; they rarely see them.
- Increasing age brings about a decline in sexual desire and interest.
- Older adults are not physically capable of engaging in sexual intercourse.
- Older adults are very isolated from their communities.
- Social contacts decrease with increasing age.
- Older women focus mainly on keeping families together.
- Older women suffer from poor physical health.

http://www.psichi.org/pubs/articles/article_38.asp
Cultural Beliefs on Sex and Sexuality

- What is sex?
  - How do we define sex/sexual activity in the U.S. in the year 2007?

- What is sexuality?
  - How do men, women express their sexuality?

- What is sexy?
  - How do we, as a culture, create standards through which our perceptions are shaped as to who/what is attractive or desirable?
Older Adult Sexuality in the Media: Pepsi, Britney Spears and Representations of Older Adult Sexuality

- [http://www.youtube.com/watch?v=Jt8uNG02ix](http://www.youtube.com/watch?v=Jt8uNG02ix)
Sex and Seniors

- How do our perceptions impact on our practice as Health Care Providers for the older adult patient?
  - What do you think of when you view these pictures?
  - What health issues would you have on your mental list of “things to address”?
Physiology and Psychology of Aging - Impact on Sexual Health and Sexual Expression

- Men
  - Erectile Dysfunction (ED)
    - HTN, diabetes, BPH and s/p prostatectomy, insufficient testosterone, chronic pain, medications (beta blockers)
    - Treatments – Viagra/Cialis, testosterone replacement, penile implants, pumps, treat diabetes, pain management
  - Other Health Issues w/out ED as a component
    - HTN, chronic pain, arthritis, COPD, diabetes,
  - Life gets in the way
    - Family, Work, Stress, Depression (men less likely to discuss this)
Physiology and Psychology of Aging -
Impact on Sexual Health and Sexual Expression

- **Women**
  - Peri and Post Menopausal changes
    - Peri menopause: early/mid forties onset for most women including hot flashes, lack of sleep, irritability, depression,
    - Post menopause: lack of estrogen causes thinning vaginal walls, decreased elasticity, the vagina shortens and narrows, and decreased lubrication during sexual arousal
    - The Women’s Health Initiative – Hormone Replacement Therapy (HRT)
  - Other Health Issues
    - Chronic pain, hysterectomy, mastectomy, HTN, diabetes, arthritis
  - Life gets in the way
    - Family, Work, Stress, Depression, *Sexual Trauma*
Senior Sexuality - Stating the Obvious

- Despite these barriers, both cultural and physical, older adults are still interested in and having sex!
- Lindau, ST et al, NEJM, 2007 “A Study of Sexuality and Health among Older Adults in the United States”
  - “the majority of older adults are engaged in spousal or other intimate relationships and regard sexuality as an important part of life”
The Gray Panthers – Hear Them Roar

- According to the AARP “Sexuality and Aging” survey, older adults, “wanted health care providers to know that ‘sex was not just for the young’ and to promote an open, accepting environment in which sexual issues could be discussed” (Amin et al., 2003, p. 1175).

- Lack of sexual expression and intimacy can lead to a decreased Quality of Life. (Bauer, 1999; Bauer & Geront, 1999, Hajjar & Kamel, 2003; Hajjar & Kamel, 2003; Kaas, 1978; Palacios et al., 2002)
Sexually Transmitted Infections (STIs) in the Older Adult

- What percentage of people over 65 are diagnosed w/ a new STI each year?
- What percentage/number of people over 65 have an STI and NOT diagnosed?
  - CDC, “for the years 2000 through 2003, an estimated 30,000 men and women were 45 or older at the time of their diagnosis of HIV, comprising 23 percent of the total diagnoses during those years.” This population “accounted for 30 percent of all those diagnosed w/ AIDs in 2002 who had been infected through heterosexual sex.”
    (http://www.aarpmagazine.org/lifestyle/relationships/hiv_over_50.html)
  - Between 1991 and 1996 the number of AIDs cases in people over 50 increased twice as quickly than in younger adults.
    (HAHOF, 2005)
STIs in the Older Adult

- Answers to these questions are difficult to ascertain as there is a dearth of data.
- As of 2005, the public health data ended w/ age 50 or 55! In Europe, older adult data was grouped age 45 and up.
- In health care, funding is often driven by “perceived” need. That is, if the data is there and the problem evident, funding will be awarded.
Sexually Transmitted Infections (STIs) in the Older Adult

- “Condo Cowboys” - per the literature, in independent/assisted residential communities men with multiple sex partners.
- “In Chicago, a study determined that 44% of men older than 60 reported multiple sexual partners”
- Risky behaviors are not limited to the younger generations
STIs in the Older Adult - Missing the diagnosis

- HIV symptoms can mimic symptoms of many other disease processes that are common in older adults.
  - Fatigue, weight loss, dementia, skin rashes, lymphadenopathy, resistant bacterial infections, respiratory complications, skin problems can be mistaken for thyroid or endocrine disorders, depression, cancer, or failure to thrive (FTT).

- Older adult immune system less likely to mount a response in comparison to younger adults – therefore the “flu-like” symptoms of HIV infection may be initially more muted
  - According to one study, “Among diagnosed AIDS patients 80 years or older, 37% die within 1 month of diagnosis”.
Complicated co-morbidities and polypharmacy make HIV treatment more complex

- Decreased liver and renal function and dosing antiretrovirals
- DM Type 2, osteoporosis and hyperlipidemia amplified by most common antiretrovirals
- Lack of research on HIV medications in people over 65
- Side effects and quality vs. quantity of life
Real Life experiences

Mrs. D 85 yo WF w/ new onset of AMS. Hx of HTN, chronic back pain, diabetes, recurrent UTIs, wheelchair bound and early dementia.

- What questions would you ask in the H&P?
- What tests would you order?
- What’s your differential diagnosis?
Barriers to optimizing older adult sexual health in the Health Care setting

- Health Care Provider
  - Discomfort and/or embarrassment
  - Personal beliefs (religious, cultural, etc…)
  - Lack of education
  - Lack of time and “prioritizing” health issues that “matter more”
  - The Medical Model focuses on the dysfunction of a system. Sexuality and sex are more than just the penis and vagina.

- Patient
  - Discomfort and/or embarrassment
  - Personal beliefs
  - Lack of Knowledge
  - Community vs. SNF dwelling
    - for the latter, may assume that the geographical barriers are insurmountable and, therefore, don’t bother to bring these questions up.
    - Mr. Smith 92 yo WM w/ syncopal episode
What can we do, as HCPs?

- How do we, as HCPs, address issues of sexual health w/ our older adult patients?
  - Incorporate sexual health history into an initial/new patient appointment. Should this be on paper? In person?
  - Do we initiate the discussion? Or do we allow the patient to ask? What could be problematic with either of these approaches?
  - Safe sex – how would you feel about educating a 70 year old Widower on condom use and HIV testing?
  - Better sex – are you able/comfortable with giving a 79 year old, post menopausal woman advice on how to improve her sex life w/ her current partner? (i.e. types of lubrication, sex toys, positions/methods of sexual expression that account for a less abled physical status, safe sex, etc...)
Books - Information for the patient and the Health Care Provider

- Dr. Ruth “Sex after 50”
- Robert Butler “The New Love and Sex after 60”
- Robert Wolley “Seniors in Love”
- Ruth Jacobs “Be an Outrageous Older Woman”
- Google/Amazon.com
Websites - Information for the patient and the Health Care Provider

- **AARP**
  - [http://www.aarp.org/](http://www.aarp.org/)
  - 2000 Sex Survey
  - HIV over 50

- **HIV**
  - [http://www.hivwisdom.org/](http://www.hivwisdom.org/)

- **Sue Johnson**
  - [http://www.talksexwithsue.com/index2.html](http://www.talksexwithsue.com/index2.html)

- **Dr. Ruth**
  - [http://love.ivillage.com/author/bio/0,,prtr,00.html](http://love.ivillage.com/author/bio/0,,prtr,00.html)

- **Dating**
  - [www.seniormatch.com](http://www.seniormatch.com)

- **Senior Journal on Sex and Senior Citizens**
  - [http://www.seniorjournal.com/Sex.htm](http://www.seniorjournal.com/Sex.htm)

- **Institute on Aging**

- **Sexual Health**
What can we do as HCPs in the Nursing Home Environment?

- So far, these questions have focused on the older adult living in the community. What about the older adult resident of a Skilled Nursing Facility (SNF)?
- What barriers exist to sexual expression and sexual health?
  - Lack of privacy
  - Physically disabled/debilitated
  - Negative attitudes of staff and family members
  - Cognitive decline – at what level of dementia can a person no longer give consent?
- Legal issues
- Family concerns
- Staff bias/ageism
Developing a Senior Sexuality Series

- What topics would you include? In what setting would you deliver this information?
  - Sexuality of older adults – cultural, medical, religious, and personal constructs of sexuality
  - Physiological changes in the older adult woman/man and their impact on sexuality/sexual health
  - What can your NP/MD do to help w/ these issues?
  - Safe Sex for Seniors (STIs, protection, testing, treatment, etc…)
  - Alternative methods and means of physical and emotional pleasure/enjoyment
  - Discussions on how to make Assisted and Long Term Care Facilities more ‘Senior Sex Friendly’ for residents
Senior Sexuality

Thank you for your time and attention!