

# The Women's Health Research Program Health Bulletin

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womenshealth.med.monash.edu.au

## Antidepressant therapy and sexual function

20 per cent of Australian women will experience clinical depression at some time in their lives, with many women using antidepressant therapy in their midlife years.

Impaired sexual function is a common feature of depression. It is also a common, but often unrecognised, side effect of the most frequently prescribed antidepressant therapy used by Australian women: selective serotonin reuptake inhibitor (SSRI) therapy. Of course, loss of libido may also be related to other issues in a woman's life such as home, work or relationship stress or other medical illnesses.

### About 55 per cent of women using antidepressant therapy experience the symptoms of Female Sexual Dysfunction (FSD).

The most common problems are:

- loss of interest in sex;
- difficulty in arousal; or
- a delay or inability to orgasm.

It is important to talk to your GP about your symptoms as female sexual dysfunction can impact adversely on self-esteem, quality of life, mood and relationships with sexual partners.

Although we know that testosterone therapy can improve sexual wellbeing in women without depression, no studies have been undertaken to determine if women experiencing antidepressant-associated sexual dysfunction would benefit from testosterone therapy. We are presently undertaking a study of the

effectiveness of transdermal testosterone in women experiencing loss of libido while taking antidepressant medication. This is an NHMRC funded study being conducted in Melbourne. Women aged between 35 and 65 years old, on a stable dose of antidepressant medication for the past three months and experiencing a loss of sexual desire or arousal will be allocated to treatment with either a testosterone patch or an identical placebo.

For further information go to <http://womenshealth.med.monash.edu.au>.

*Reference: Schweitzer I, Maguire K, Ng C. Sexual side-effects of contemporary antidepressants: review. Aust N Z J Psychiatry 2009;43:795-808.*

### Get involved in research

Are you age 55–70 years old and interested in being involved in a study to evaluate if low dose testosterone therapy might enhance learning and memory? To participate you need to be otherwise well and not taking any hormone therapy or antidepressants.

If you would like more information, regarding this and other studies please visit our website <http://womenshealth.med.monash.edu.au> or contact the Women's Health Research Program on 03 9903 0820 or by email on [womens.health@monash.edu](mailto:womens.health@monash.edu)

### Why is sexual wellbeing important for women?

- The World Health Organisation wisely reminds us that "sexual health is a state of physical, emotional, mental and social well-being related to sexuality; it is not merely the absence of disease, dysfunction or infirmity".
- In a large population-based survey, > 80 per cent of women aged over 30 years agreed: an active sex life is important for one's sense of well-being.
- Higher levels of physical pleasure in sex are significantly associated with higher levels of emotional satisfaction.
- Both men and women reporting a discrepancy between their own and their partner's sexual desire have lower relationship satisfaction and individuals in sexually inactive marriages report less marital happiness.
- Sex is not 'just for the young'; approximately 52 per cent of 70 year old women report they are sexually active.
- Women experiencing sexual health problems that concern them have diminished quality of life, similar to in magnitude to that seen in adults with other common chronic conditions such as diabetes and back pain.

