**SEX? OUCH. Let’s Talk About It!**

*Dyspareunia:* “Pain when sexual intercourse or other sexual activity that involves penetration is attempted or pain during these activities. The pain may be superficial or deep,” (Basson, 2019).

Consider this: You consume all of the necessary servings of fruits and vegetables, little to no red meat, and limited processed foods and cane sugar. You partake in moderate exercise five days per week. The relationship you have with your family is thriving, and all of your platonic relationships are healthy, supportive, and mutual. You manage your time effectively, sparing moments to enjoy yourself. You are flourishing both physically and mentally. You partake in safe, consensual, and desirable sex that… is almost always painful on varying levels. Frequent cramping, migraines, excruciating menstrual cycles, and fatigue compete daily with those self-sustained good moods.

Much like you, more than eleven percent of women face these afflictions too. The symptoms listed above - and many more - are often caused by endometriosis, a disorder in which the tissue that usually surrounds the uterus grows externally, commonly affecting one’s pelvic floor, ovaries, fallopian tubes, and other pelvic organs (Mayo Clinic, 2019). A symptom of endometriosis that is rarely discussed is dyspareunia, but it is widely experienced among individuals with endometriosis (Ferrero, et al, 2005). Sex-related activities including penetrative acts can cause pulling and stretching of endometriotic tissue, especially when connected to the lower uterus or near the vagina. This can result in pain of ranging severity that might resemble an acute stabbing pain or deep abdominal cramping (Silva, 2018).

In a society that already suppresses the notion of women enjoying sex, ventilating the subject of painful sex can be even more difficult. The discussion of dyspareunia is thoroughly taboo, as it essentially combines the uncomfortable characteristics of sex with the topic of menstruation. Talking about sex for the sake of managing discomfort rather than for the sake of being ‘sexy’ can seem a little out of bounds. And because society normalizes excessively painful periods, persons with uteri often suffer through their experiences without a mere sound.

Activist, author, and advocate, Erin Havel accounts, “Endometriosis, as far as I knew, was something older women may experience. Statistics and facts about ‘female issues’ are not always openly discussed in the same way as other medical conditions,” (2014). We don’t talk about endometriosis, and we certainly don’t talk about pain associated with sex, something that is meant to be uniquely pleasurable. Western culture considers sex a taboo subject of which everyone engages in but rarely discusses; It makes us uncomfortable. No one brings to
conversation awkward after-moments of interrupted intercourse due to a medical disorder. However, suppressing it in conversation can prove even more detrimental for the affected group. So how is a girl supposed to cope? How can society become better equipped for this dialogue?

Coming forward with something as potentially emotionally tolling as having this disease can be tough. But it is worth noting that confiding in loved ones can create a positive impact on one’s well-being. Opening a dialogue with friends and family, in as little or as much detail as feels appropriate, can be a pivotal first step in managing the effects of endometriosis on one’s personal life. It has been supported by numerous scientific studies that stress can actually contribute to and exacerbate the progression of endometriosis. Scientists have found in a mouse model for the disease that mice exposed to stress experienced an increase in endometriotic manifestations and related inflammation (Cuevas, et al, 2012). In other words, not only is managing emotional tolls caused by endometriosis important for one’s psychological health, but it could also be significant in managing the disease itself. Furthermore, releasing the stress of the disease by finding comfort in others could be vital in regards to symptom management.

Finding this support system is paramount, but so is communicating with your partner. This can be exceedingly challenging, but confiding in an individual who knows you intimately can provide great relief. While the subject could pose obstacles in finding common grounds that satisfy all partners both emotionally and physically regarding sex, a study found that the majority of partners of individuals with endometriosis felt that the experience of coping with endometriosis in relation to their sex life gave them a new kind of companionship (Jean Hailes, 2019).

Fortunately, there are various ways for affected individuals to cope with the physical effects of dyspareunia in order to still have enjoyable intercourse. Finding what sexual positions and activities work best for a partnership and partaking in activities other than penetration can not only combat dyspareunia, but it can also bring a relationship closer. Incorporating lubricant and extended foreplay has been shown to decrease the effects that endometriosis has on sex. Surveys have noted that some specific penetrative positions are more comfortable than others and vice versa, but it is important to note that different conditions work for different people. Heating packs, advil, and cold clothes are all combative to an individual’s physical discomfort before and after sexual activity (Silva, 2018). Without any supported curative measures or medications for endometriosis, these coping mechanisms are salient for upstaging painful sex.

Other, more broad measures can contribute to endometriosis-associated dyspareunia management too. Incorporating potential symptoms both individuals with uteri and their partners might face during intercourse into sex education can help to standardize the conversation of dyspareunia. Greg Hunt, a health minister from Australia stated during a Council of Australian
Governments, “And that patients, women who are suffering from endometriosis and who may not know that’s what they have, have the confidence… and not to suffer in silence,” (Davey, 2018). He currently advocates for a plan to incorporate the topic of endometriosis in school sex education in order to give affected individuals the knowledge they deserve. Additionally, initiating the discussion can equip others who aren’t directly affected to better support and understand those who are. Normalization of the conversation itself is a must. With an open dialogue, all parties can partake in a more accepting relationship through both platonic and intimate lenses.

As scientist and author Joanna Cavaco Silvia puts it, “Overall, dealing with painful sex may be a difficult and emotional task. The goal is to foster genuine and open communication, to ensure that sex is pleasurable and free of pain for each partner,” (2018). Symptoms of endometriosis are difficult to manage, especially when they play a role in a person’s intimacy. Creating an accepting and supportive society can decrease the burden of the physical and mental loads that it causes.

We hope that the audience can go forward with new knowledge about endometriosis-associated dyspareunia, armed to help those affected and initiate change, whether it be a friend, family member, or partner. Of the endo-affected audience, we hope that this work helps you begin or elevate your journey tackling this endo-symptom. Find what works for you, keeping in mind that your own physical and psychological comfort is essential, and be loud about it.
References:


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