TRANSCRIPT

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EPISODE NAME: Love, Intimacy and Sex in Later Life

Good afternoon and thanks for joining us; I am Judy Simpson. It's fair to say that our society often has a difficult time just talking openly about love intimacy and sex. For many people these are difficult subjects to discuss even with people we are close to, and become even more so as we grow older. So this afternoon we have invited a pioneer in the field of sexuality and mental health to be our guest. Gale Golden is an associate professor of psychiatry at the University of Vermont. In addition to having had a private practice for nearly 50 years focusing on clinical sexology, she often works with couples and older adults on sexual concerns. Thanks so much for being with us.

Gale.: Thank you for having me.

Judy.: Why are we talking about sex in later life?

Gale.: Sex is essential to all life. From the minute we were conceived to children having erections in utero. Vaginas lubricate before we are even born. With a population getting older and more people would realize that comfort that comes from being partnered or even a partnered but having some kind of sense of our sexual being is very very important to mental health and physical health frankly.

Judy.: What does research show us about sexual habits of people who are over the age of 60?

Gale.: It shows us that certainly since Kinsey’s era which is 1948 starting then and all the way through to the AARP study on aging. All the studies show the things that we have myths about common myths like people are not sexual after 60 or it's not important to life. Although studies show right from the early forties on that sex is essential to a viable older life. That people want to have sex. There's myths about don't be a dirty old man or it's not important if you have breast cancer focus on that but it really is important to evaluate why sex is important to me and what is sex going to look like in that later life and to not get caught in the myths and therefore feel isolated or marginalized or deprived of something that's really very nice.

Judy.: Research does reveal that sometimes older adults will give up the comfort of sexual contact unnecessarily. Why is that?
Gale.: Because they don't know that most issues with sexual behavior or sexual parts are treatable. Sexual problems sexual behavior problems are highly treatable and its age appropriate to have some changes. We used to be able to eat three pepperoni pizzas and have 10 beers and fall asleep very nicely when you're 20 but when you're 60-70 or 80 the body can't do that anymore. The body changes and a lot of people with the body changes say I'm done rather than saying this is a change and maybe we can mitigate it and some way.

Judy.: And people should expect there will be changes?

Gale.: Absolutely.

Judy.: What are some of the common changes that happen in women of this age group?

Gale.: One of the most common things we see is vaginal dryness. Changes in the vaginal climate because women's hormones disappear as you move through life post-menopause and on. Hormones have generally helped the process of keeping the vagina a healthy climate. There are a lot of things you can do about painful dry vaginas. First is go to a pelvic physical therapist. Talk your doctor about what kind of lubricants you should use. What are healthy for you. Sometimes surgeries or medications or a change in hormones contribute to that but there really are a lot of very good interventions for that particular issue. For women that is a common one. There are other things. Change in having orgasm some more pain and less sexual desire but all those things have solutions. For men the first thing the first responder generally to something happening to a man in later life might be that they're not having erections or ejaculations the way they used to. A lot of men will just assume and their wives oh, we are over the hill we shouldn't be doing this were too old my hips hurt anyway rather than see it as a natural process. Again something that can be mitigated. It's up to the couple or the individual to sit down and have a talk with yourself about what to expect from sex now. What's the purpose of it? Is it comforting? Is it just too that I have your undivided attention for a few minutes. What is important to you and if that's missing to be able to have that conversation.

Judy.: Because the other person in a relationship may feel like it's them.

Gale.: That's of course absolutely that's one of the things I work on a lot to my office. Somebody feels very rejected because the other person says I don't have any sexual desire. That's very complicated intervention in terms of what is sexual desire it’s different for everybody. Some people feel rejected. You can never go wrong with a hug and a kiss that is essential sexual behavior. If all you're thinking about is orgasms when you want to get in a sexual or sensual situation that's not the only goal. There are a lot of other things to being sexual or close with one another. Just feeling good being together getting touched talking intimately. Those are also good sexual behaviors. Whether you're partnered sex or not you are still a sexual human being. Woody Allen says there's even sex after death. I don't know about that, I'm not a theologian, but you can be sexual for a very long time.

Judy.: There are ways to handle that situation too. You were talking to me earlier before we were taping the program about the importance of books.

Gale.: Absolutely and that's my favorite thing. Today you can read about anything in the world online or off. There are tremendous resources so there's no excuse to say I cannot read a book about it. I think that's really the most important thing because everyone says you have to
communicate and be able to talk to each other and silence is not a solution which it isn't. You've got to read a book because that's a lot easier to say to your spouse or partner look what I just read here I always wish I could say this to but I never really could. Would you read it? It's just wonderful. You have always wanted to say that to me? Yes sure we can have sex with no clothes or whatever hits the eye and the book. There are lots of good resources in this community particularly the Dana Medical Library which often people get put off because it says Dana Medical Library that it's only for medical students but because the UVM is a state college you're welcome to come in. They have a huge sexual health section with lots of good books in there. I can recommend books but just getting going with a book that simple to read has myths about sexuality. Some of them are just plain funny like this wonderful book called finding the doorbell by Cindy Pierce. It's great it's very readable it's real stuff. I know what to be my best intervention at the office. I do a whole structured thing around reading it. Some people want to read page one to the index a history do what you want to read about it but underlying whenever it leaps out at you and share it with your partner or spouse and it gets a conversation going. If you can make time to do that then you can also proceed to learn other skills in terms of making time for sex and what is really sex negotiating that. What does a couple want from sex that's important and again there are lots of good books to help you move forward.

Judy.: Once again you have the book and you can say read this chapter or think about this because then it's not a personal criticism of your partner.

Gale.: Yes a lot of people feel for example if a woman isn't lubricated or a man's penis isn't getting quick response to the other person is very often quick to say he doesn't love me anymore or she doesn't love me anymore rather than let's look at what's going on here. But certainly it is age appropriate for men to have slower erections. Erections they could think up in the past don't think up it takes more stimulation and direct stimulation to get an erection. Orgasms feel different as men get older but don't quit because ‘use it or lose it’ is really important good advice. It's been around for many years.

Judy.: From the marketing you see on TV, clearly there's a market.

Gale.: There is a market. Let me say this about Viagra. The agg and the other erectegenics are very helpful for some people. If you do not include there's two people in the same sex life. If you don't include the person you're having sex with in the decision to what erectegenics he used or what interventions somebody may suggest the other person is going to be left out in the midst and have very negative response. If someone comes home and says hay honey I got Viagra look what I got for you. She may be post-surgical she may have bad arthritis and think get away from me. It's not just a box of chocolates. But it also can change the whole discussion after all sex is comforting to people.

Judy.: Let’s talk about that. Discussions with your doctor, how do you get started with that?

Gale.: The research shows and there's lots of research that shows that doctors do not talk to their patients about sex. They put it on the pre exam check off list.

Judy.: Good you circled that terrific.

Gale.: Very few 75% of doctors don't even pay attention to that whether those 75% of people do. Doctors my opinion is and I haven't done research on this particularly but I certainly know
the research on it. Doctors are not always informed on what to do or they expect them sell some know too much and don't want to be bothered. I'm a cardiologist what do I want to know with all the sexology stuff you can become ask able. Physicians just by saying I don't know but I know where to look it up. Just like parents children come and they want to know what is intercourse for example and somebody says I don't know how to talk about this to my children that there's a good book to look up. That changes the whole mix.

Judy.: What are some of the other changes or things people should know about when they want to talk to their doctors?

Gale.: I think you ask your doctor. If they are ask able then be very blunt about it. All doctors need to do is to expect themselves to listen not be judgmental to say about how the and other resources. Why don't you go to the library get a good book? Patients can ask to know any good books? What are the resources? Do you know a pelvic physical therapist? Very few doctors recommend pelvic physical therapists.

Judy.: I never heard of that before you brought it up.

Gale.: I hear that a lot. I speak at cancer conferences for example that's perfectly wonderful intervention and somebody says my doctor never said that, I've never heard of that. Here in Vermont we have a terrific program and I certainly would be glad. You could look it up in the yellow pages but it's very useful for women particularly who have vaginal pain pain on intercourse. Probably was lubrication. Sometimes the interventions particularly for cancer wreak havoc with the vagina. At a time when someone's life is threatened their partner stays away from them that's not a good thing.

Judy.: We're just about out of time I know you have some final advice for folks.

Gale.: Yes, the first is the only thing you should do in later life when you're tired is go to sleep. Don't expect to have sex when you're dead tired. Sex is important. My advice is to talk about it, get a book if you're embarrassed and say we need to sit down and think a lot about what we want from sex. Sex is good for you and it's good to share, it is good to be comforted. A wonderful bone crushing hug or just lying in bed talking that's intimate that intimacy and that's really important. It's important to healing up from whenever you have to deal with in later life if you have a medical issue. That is the time for comfort.

Judy.: So you do change, but roll with it.

Gale.: That's right. You have got to shift the paradigm.

Judy.: There you go. Thanks a lot Gale for joining us a great topic.

Gale.: Thank you very much for having me. It's my passion.

Judy.: That's our program for today; I'm Judy Simpson. We will see you again next time on Across the Fence.

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