

FEMALE SEXUAL FUNCTION

Impact of Contraceptive Type on Sexual Desire of Women and of Men Partnered to Contraceptive Users



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ABSTRACT

Introduction: Research investigating the impact of contraceptive use on sexual desire has produced mixed results. This scholarship also has had inconsistent methodology, with some studies not separating contraceptive types and others lacking non-hormonal comparison groups. Relationship context of contraceptive use and sexual behavior also have not been well represented.

Aims: To investigate the impact of contraceptive type on sexual desire in women and in men who are partnered to contraceptive-using women.

Methods: In two separate studies we examined the impact of contraceptives on the sexual desire of women currently using contraceptives and men partnered to women using contraceptives. The first study examined the impact of contraceptive type on sexual desire in women and in men partnered to contraceptive users in relationships of different lengths. The second study examined this impact in heterosexual couples in long-term relationships.

Main Outcome Measures: Solitary and dyadic sexual desire as measured by the Sexual Desire Inventory and contraceptive type as categorized into three types: oral hormonal contraceptive, other hormonal contraceptive, and non-hormonal contraceptive.

Results: Contraceptive type significantly affected solitary and dyadic desire. Women on non-hormonal contraceptives reported higher solitary sexual desire than women on other hormonal contraceptives. Women on oral hormonal contraceptives reported significantly higher dyadic sexual desire than women on non-hormonal contraceptives. In male partners of female contraceptive users, solitary and dyadic sexual desires were not affected by partner contraceptive type. In the multivariate model, relationship length and age were stronger predictors of contraceptive type than was solitary or dyadic sexual desire. At the couple level, contraceptive type also was not related to solitary or dyadic sexual desire in men and women.

Conclusion: Contraceptive type can affect solitary and dyadic sexual desire in women; however, contextual factors seem to be stronger predictors of sexual desire for long-term coupled women and men than contraception type. *J Sex Med* 2016;13:1359–1368. Copyright © 2016, International Society for Sexual Medicine. Published by Elsevier Inc. All rights reserved.

Key Words: Hormonal Contraception; Contraceptive Type; Sexual Desire; Partner Effects; Dyadic Research

INTRODUCTION

For decades researchers have presented mixed results on the effects of hormonal contraceptive (HC) use on women's sexual desire.^{1–3} In addition to their primary use for pregnancy prevention, some research has pointed to non-

contraceptive—related benefits of HC use, such as to alleviate excessive menstrual bleeding, menstrual pain, and acne.⁴ However, unintended side effects of HC use also have been reported, including decreased sexual arousal, sexual desire, and sexual frequency, which are cited as main reasons for HC discontinuation by women.⁵ Across studies investigating the impact of HC use on women's sexual lives, participants have reported a wide variety of side effects, including effects on women's sexual functioning that are positive,^{6,7} negative,^{5,8} mixed,^{9,10} and/or non-existent.^{11–13} One explanation for these inconsistent research findings is that HCs vary in their delivery method, chemical composition, and hormonal dosages, as do women's individual biological sensitivities to exogenous hormones. Moreover, sexual functioning encompasses different constructs with complex diagnostic criteria, including sexual satisfaction,

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orgasm, pain, arousal, and desire,¹⁴ which individually might or might not be influenced by HC use in the same ways.^{15,16} Given these variable and inconsistent findings, researchers have recently begun to examine the effects of HC use by separately comparing the various forms of HC delivery (eg, vaginal ring, oral pill, hormonal patch, and intrauterine device [IUD]) as possibly having specific influences on the construct of sexual desire for the millions of women who use and often rely on HCs.^{10,17,18} However, as a current review of the literature has indicated, most studies investigating associations between sexual desire and HC use have not included important contextual factors, including partner effects, relationship duration and satisfaction, and general physical or mental well-being.³

Highlighting the psychological, social, interpersonal, and biological complexities of HC use, some studies have investigated partner effects of HC use in romantic couples.¹⁹ The effect of HC use on sexual desire in individuals embedded in long-term partnerships seriously influences the socio-sexual context of women's, and their partners', sexual behavior and HC use. The present report presents two studies examining the relations between contraceptive use and sexual desire in women contraceptive users and the male partners of women contraceptive users. The present study compared oral and combined HC (OC), other HC (OHC), and non-HC (NHC) use in addition to an exploration of effects on the male partners of women using these various types of HC. Study 1 explored sexual desire and contraceptive type at the individual level in women using OC, OHC, or NHC and in men in a relationship with a woman using OC, OHC, or NHC. Study 2 aimed to incorporate a couple-level approach to measure the effects of contraceptive use on sexual desire in the context of long-term romantic relationships.

The present study incorporated several theoretical and methodologic perspectives by investigating the influence of HC use on the sexual desire of coupled individuals (individual level) with various romantic relationship lengths. Therefore, using two studies—one of individuals who were in relationships and another of couples—we aimed to answer the following research questions: (i) What is the relation between dyadic sexual desire and contraceptive type after controlling for relevant contextual variables, including relationship satisfaction, sexual satisfaction, age, relationship length, and solitary sexual desire, in men and women separately? (ii) What is the relation between solitary sexual desire and contraceptive type after controlling for relevant contextual variables, including relationship satisfaction, sexual satisfaction, age, relationship length, and dyadic sexual desire, in men and women separately?

STUDY 1

Methods

Procedure

As part of a larger study on sexual and reproductive health, participants were recruited to study 1 in one of two ways:

online social media (eg, Facebook and Twitter) and the online data collection mechanism Amazon Mechanical Turk (Amazon, Seattle, WA, USA).²⁰ Interested participants were directed to a link to the study website, hosted by Qualtrics (Provo, UT, USA), where potential participants were provided additional information about the study, including eligibility criteria (English language proficiency, age ≥ 18 years, and currently in a romantic relationship). Participants who wished to continue were directed to provide informed consent before beginning the web-based study questionnaire, which took approximately 20 minutes to complete. When participants finished the survey, those recruited through online social media were directed to a separate website where they could elect to enter their name into a drawing of five U.S. \$40 Amazon gift cards. Participants recruited through Mechanical Turk were provided with 0.30¢ each at completion. The institutional review board of the University of Kentucky (Lexington, KY, USA) approved all study protocols.

Measurements

Demographics and background. Information was collected at the beginning of the online questionnaire and included sex, age, relationship status, and relationship length.

Contraceptive use. Participants were asked which of three categories corresponded to their type of contraceptive use: OC, OHC, or NHC.

Relationship satisfaction. Relationship satisfaction was measured using the Global Measure of Relationship Satisfaction.²¹ This instrument measures responses to the question, "In general, how would you describe your overall relationship with your partner?" Responses are on a seven-point scale.

Sexual satisfaction. Sexual satisfaction was measured using the Global Measure of Sexual Satisfaction.²¹ This instrument measures responses to the question, "Overall, how would you describe your sexual relationship with your partner?" Responses are on a seven-point scale.

Sexual desire. The Sexual Desire Inventory (SDI) Solitary Subscale (SDI-S) and Dyadic Subscale (SDI-D)²² were assessed. The SDI-S is a seven-item measurement that assesses an individual's interest in solitary sexual activity during the past month. The SDI-D is an eight-item measurement that assesses an individual's interest in dyadic sexual activity during the past month. For the two subscales, higher scores are indicative of higher sexual desire. The SDI has shown strong reliability and validity,²² and in the present study internal consistency on the SDI-S was 0.89 for women and 0.86 for men and on the SDI-D was 0.90 for women and 0.86 for men.

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