

**ORIGINAL RESEARCH—EDUCATION****Dealing with Female Sexuality: Training, Attitude, and Practice of Obstetrics and Gynecology Residents from a Developing Country**

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**ABSTRACT**

**Introduction.** There is little research on how obstetrics and gynecology (Ob/Gyn) residents deal with female sexuality, especially during pregnancy.

**Aim.** The aim of this study was to assess the training, attitude, and practice of Ob/Gyn residents about sexuality.

**Methods.** A cross-sectional survey of Brazilian Ob/Gyn residents enrolling in an online sexology course was conducted. A questionnaire assessed their training in sexuality during medical school and residency and their attitude and practice on sexual issues during pregnancy.

**Main Outcome Measures.** Training, attitude, and practice of Ob/Gyn residents regarding sexuality were the main outcome measures.

**Results.** A total of 197 residents, from 21 different programs, answered the online questionnaire. Mean age was  $27.9 \pm 2.2$ , most were female (87%), single (79%), and had graduated in the last 5 years (91%). Almost two-thirds (63%) stated that they did not receive any training at all and 28% reported having only up to 6 hours of training about sexuality in medical school. Approximately half of the respondents (49%) stated that they had received no formal training about sexuality during their residency up to that moment and 29% had received  $\leq 6$  hours of training. Over half (56%) never or rarely took a sexual history, 51% stated that they did not feel competent or confident to answer their pregnant patients' questions about sexuality, and 84% attributed their difficulties in dealing with sexual complaints to their lack of specific knowledge on the topic.

**Conclusion.** The vast majority of Brazilian Ob/Gyn residents enrolling in a sexuality course had little previous formal training on this topic in medical school and during their residency programs. Most residents do not take sexual histories of pregnant patients, do not feel confident in answering questions about sexuality in pregnancy, and attribute these difficulties to lack of knowledge. These findings point to a clear need for additional training in sexuality among Brazilian Ob/Gyn residents. **Vieira TCSB, de Souza E, da Silva I, Torloni MR, Ribeiro MC, and Nakamura MU. Dealing with female sexuality: Training, attitude, and practice of obstetrics and gynecology residents from a developing country. J Sex Med 2015;12:1154–1157.**

**Key Words.** Female Sexual Function; Sexology; Sexuality; Human Sexuality; Pregnancy; Pregnant Women; Medical Education; Medical Residency; Education; Curriculum; Sexual Health; Attitude

**Introduction**

In theory, every medical school graduate should have received enough information to be able to

deal with basic sexual health questions and obstetrics and gynecology (Ob/Gyn) specialists should receive further training in this area. However, few Ob/Gyns feel prepared and comfortable dealing

with questions about sexuality, especially during pregnancy, a period with a high prevalence of sexual dysfunction symptoms [1–3].

Although training of residents is essential to improve their skills in dealing with sexuality, there is little research in this area. In a previous study, we assessed the skills of residents from different programs in dealing with sexuality [4]. Less than 20% of 47 Ob/Gyn residents routinely asked pregnant women about their sexual health and over 70% of 154 residents declared that lack of knowledge was the main obstacle in evaluating patients' sexual complaints. Based on those findings, we created an online course about sexuality for Brazilian Ob/Gyn residents.

The main objectives of this study were to assess the formal training on sexuality that Ob/Gyn residents had received in medical school and during residency, as well as their attitude and practice patterns when dealing with sexual issues of pregnant women.

## Methods

This cross-sectional study was conducted in São Paulo, Brazil (March to May 2014) and involved 197 Ob/Gyn residents who were enrolling in a free, 20-hour online sexology course. The residents were asked to voluntarily fill an anonymous online questionnaire with multiple choice questions that were based on a previous national survey involving Brazilian physicians [5]. The original questionnaire was tested in a group of 15 volunteer residents who did not enroll in the course and modified to improve comprehension.

We used a convenience sample of all residents who enrolled in the course and voluntarily agreed to fill the questionnaire. Differences between junior (first to second year) vs. senior (third to fifth year) Ob/Gyn residents were compared using Student's *t* and chi-square tests.

This study was approved by the Ethics Committee of São Paulo Federal University and all participants gave online written informed consent.

## Results

Out of 216 residents who enrolled in the online course, 197 (91.2%) voluntarily filled the questionnaire. Participants were from 21 different institutions, had a mean age of  $27.9 \pm 2.2$  years (range 24–34 years), and 91.4% had graduated in the last 5 years (range 1–11 years). Most were

female (87.3%), married (78.7%), and Catholic (67.0%). Almost half were in their first ( $n = 44$ ) or second ( $n = 51$ ) years of residency, while the other half were in their third ( $n = 47$ ), fourth ( $n = 29$ ), fifth ( $n = 19$ ), or sixth ( $n = 7$ ) year of residency. Over two-thirds (67.5%) of the respondents declared that they enrolled in the course to improve their knowledge about sexuality and 30% because of personal interest on the topic.

Almost two-thirds (63.4%,  $n = 125$ ) stated that they did not have any classes at all and 27.9% ( $n = 55$ ) had  $\leq 6$  hours of training about sexuality in medical school. Almost half (49.2%,  $n = 97$ ) had received no formal training about sexuality during their residency up to that moment, while 28.4% ( $n = 56$ ) had received only up to 6 hours of training. Junior residents were significantly more likely to have had no training about sexuality up to that moment than senior residents (64.2% vs. 35.3%,  $P < 0.0001$ , respectively).

Only 5% of the residents frequently or always obtained a sexual history or asked obstetric patients questions about sexuality, while 56% never or rarely did so. Over 40% said that when a woman had a spontaneous sexual complaint during pregnancy, they would listen but did not know what to do and another 7% would try to minimize the problem. Regardless of their year of residency, approximately half stated that they lacked self-confidence when listening and trying to answer questions from pregnant patients about sexual issues and over 80% stated that this difficulty was due to lack of specific knowledge (Table 1). There were no significant differences in the answers of the 25 male vs. the 172 female residents in any of the questions (data not shown).

## Discussion

Unsurprisingly, approximately two-thirds of the participants declared that the main motive to enroll in the sexology course was to complement their training. The interest of Brazilian residents for more information about sexuality was evident in our previous study, where 97% of our respondents declared that they would like to participate in educational activities to increase their knowledge on this topic [4].

It was worrying to find that almost two-thirds of our young physicians had not had any classes on sexuality in medical school and that 78% of them had received little or no training on the subject during their residency programs. Other studies

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