

# Prevalence and Risk Factors of Sexual Problems and Sexual Distress in a Sample of Women Suffering from Chronic Widespread Pain

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## ABSTRACT

**Introduction.** Chronic widespread pain (CWP) is a prevalent musculoskeletal problem and a cardinal symptom of fibromyalgia, affecting up to 15% of the population. CWP is associated with substantial physical and psychological impairment and reduced quality of life.

**Aim.** To describe sexual problems in women having CWP. To compare the sexual function between patients with CWP and healthy women, and to explore potential predictors of sexual problems in women suffering from CWP.

**Methods.** A descriptive, cross sectional study involving a total of 853 individuals, including 166 with CWP and 687 healthy counterparts. For the screening of sexual problems and distress, the original and amended lifelong version of the Female Sexual Function Index (FSFI) and the Female Sexual Distress Scale were applied. A set of standardized questionnaires to assess potential risk factors for sexual problems was further used.

**Main Outcome Measures.** The levels of sexual function and distress in women with CWP was compared with those of healthy women. Univariate and multivariate linear regression was used to determine the potential predictors for sexual problems in women with CWP and healthy counterparts.

**Results.** Women with CWP reported more difficulties with lubrication, more sexual pain, and higher levels of sexual distress. Potential predictors of sexual problems in women with CWP were heterogeneous, with relationship dissatisfaction being associated with lower levels of sexual function in all the FSFI domains. Significant, domain-specific effects were further detected for anxiety sensitivity, emotional intelligence, obsessive compulsive behavior, and the big five personality traits. In general, factors influencing recent sexual problems were different from those influencing lifelong sexual function.

**Conclusions.** CWP patients report more sexual pain and sexual distress compared with controls. Assessment of sexual problems should therefore be added to routine care of patients with CWP. **Burri A, Lachance G, and Williams FMK. Prevalence and risk factors of sexual problems and sexual distress in a sample of women suffering from chronic widespread pain. J Sex Med 2014;11:2772–2784.**

**Key Words.** Female Sexual Dysfunction; FSD; Fibromyalgia; Chronic Widespread Pain; CWP; Sexual Pain

## Introduction

Chronic widespread musculoskeletal pain (CWP) is a common musculoskeletal disorder, affecting about 15% of the general population [1,2]. The prevalence of musculoskeletal pain is generally higher among women, with studies reporting estimates approximately twice as high in

women compared with men [2]. This female excess, however, remains unexplained.

CWP is the cardinal symptom of fibromyalgia (FM) and has been given a standard definition by an American College of Rheumatology Committee, emphasizing axial pain as a constant feature, as well as the presence of pain in the upper and lower quadrants, and the right and left sides of

the body [3]. CWP has been related to a number of physical and affective symptoms such as depression, anxiety, fatigue, psychological distress, and other somatic symptoms [2,4,5]. Despite recent research efforts, the etiology underlying CWP remains largely unknown, although evidence from a range of epidemiologic studies suggests an interplay of socio-demographic, psychosocial, affective, physiological, and genetic factors [3,6,7]. Epidemiologic research has recently focused on psychological entities that may predict susceptibility to CWP and CWP maintenance (e.g., Refs. 2 and 7). Such entities include, for example, anxiety sensitivity (AS), personality, coping, and relationship satisfaction. In several pediatric studies, the importance of AS in the maintenance of chronic pain and disability has been reported [8,9]. Much work has also been done using a biopsychosocial approach concerning how personality traits impact an individual's reaction to and coping with CWP (for an extensive review, see Ref. 10). Many of the studies examining normal personality traits have focused specifically on extraversion and neuroticism, in part, because neuroticism is commonly held to be a chronic condition of susceptibility to distress (e.g., Ref. 11). The prognosis for many chronic painful conditions such as CWP has also been found to be influenced by how patients cope with the condition and its consequences [12–14]. In this context, coping refers to the emotional and behavioral response strategies, such as avoidance or magnification. A growing body of evidence further indicates that interpersonal factors, that is, family and couple interaction, have an important impact on various dimensions of chronic pain (e.g., pain severity and pain behaviors) [15,16].

CWP represents a major underestimated health problem and is associated with diminished quality of life and disability [3]. Moreover, CWP is one of the most common conditions seen in rheumatology clinics, accounting for a considerable proportion of healthcare costs and representing a major economic burden to society in terms of treatment and indirect costs through disability [17].

Sexuality is an integral part of human life and therefore considered an important aspect of quality of life [18]. Recently, several studies have reported a significant link between FM—the severe end of the CWP spectrum—and a higher prevalence of sexual problems in women [19–21]. To the best of our knowledge, however, only very few studies to date have explored the prevalence of

sexual problems in a general population sample of women suffering from CWP, or investigated risk factors in these women.

Understanding such associations, however, is of importance for the management and treatment of CWP, where treatment might improve quality of life and may even contribute to improvement in pain symptoms. Therefore, the aim of the present study was to compare the distribution of sexual problems in women suffering from CWP and controls, as well as to investigate a range of psychological and interpersonal factors that might be associated with impaired sexual functioning in women with CWP. Sexual problems—similarly to CWP—are thought to be caused by a multitude of factors, and several of the psychological entities found to be associated with CWP (e.g., personality, AS) have also been proposed to be predictors for the development of female sexual dysfunction (FSD) [22]. Therefore, these variables were included as potential risk factors in the current study.

## Material and Methods

### Sample Definition

The present study included a sample of female twins enlisted in the TwinsUK registry—a register of unselected volunteers of North European ancestry recruited since 1992 [23]. The cohort consists predominantly of females (88%) because initial research focused on diseases having higher prevalence in women than in men (i.e., osteoporosis and rheumatoid arthritis). All volunteers in the registry were recruited through successive national media campaigns in the United Kingdom and Ireland and from other twin registers, including the Aberdeen Twin Registry and the Institute of Psychiatry Adult Registry. The twins have undergone extensive clinical investigations and have been shown to be comparable with age-matched singletons in terms of disease and prevalence of lifestyle characteristics [24]. In numerous studies, the cohort has further shown to be representative of the general population for a wide range of lifestyle and sexual factors [25].

The current study sample represents a subsample of the TwinsUK cohort who had data on CWP and sexual functioning available (total of  $n = 853$  female twin individuals, aged 26–82, mean age 57.7). Data collection for CWP and sexual functioning was conducted between 2008 and 2010. The study was approved by the St. Thomas' Hospital Research Ethics Committee and all twins

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