

Sexual Health During Postgraduate Training—European Survey Across Medical Specialties

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ABSTRACT

Background: Sexual health problems are common. Therefore, training in sexual health is relevant for the clinical practice of trainees and early-career specialists in several specialties who deal with patients with sexual health problems. However, little is known about how sexual health training is provided across countries and specialties.

Aim: To assess (i) sexual health training during postgraduate training programs in psychiatry, obstetrics and gynecology, urology, and endocrinology across Europe; (ii) the confidence of trainees and early-career specialists in dealing with patients with sexual health problems; and (iii) their need for further training in sexual health during postgraduate training programs.

Methods: The study was based on a collaboration among European societies of trainees in these 4 specialties. An online survey was developed and conducted from January 2015 through June 2016.

Main Outcome Measures: Self-reported questionnaire.

Results: We collected 366 completed surveys from 40 countries. Sexual health training was considered an important or very important part of specialty training by 78.7% of participants. Overall, 62.3% of participants had not received any training in sexual health. Especially in obstetrics and gynecology, the large majority did not have training in sexual health (82.8%), followed by psychiatry (59.8%), urology (58.4%), and endocrinology (56.1%). There were statistically significant differences among specialties in the confidence of participants in managing patients with sexual health problems. In general, trainees and early-career specialists who had received sexual health training felt more confident in dealing with patients with gender dysphoria ($P = .011$), need for sexual therapy ($P = .0004$), paraphilic disorders ($P = .0003$), and sexual dysfunction ($P = .0017$).

Conclusions: Trainees and early-career specialists found sexual health training important for their future medical practice; however, less than half received it during their postgraduate training. Participants felt more confident in managing patients with sexual health problems when sexual health training was included in the postgraduate training program. **Kristufkova A, Pinto Da Costa M, Mintziori G, et al. Sexual Health During Postgraduate Training—European Survey Across Medical Specialties. Sex Med 2018;X:XXX–XXX.**

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Key Words: Education; Trainees; Early-Career Specialists; Sexual Health Training; Medical Specialties

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Table 1. Characteristics of respondents according to specialty and overall group characteristics

	Psychiatry	Endocrinology	Obstetrics and gynecology	Urology	Overall
n (%)	102 (27.9)	57 (15.6)	58 (15.9)	149 (40.7)	366
Age (y), median (range)	30 (25–45)	30 (22–39)	32 (25–55)	30 (24–50)	31 (22–55)
Training (y), median (range)	3 (1–6)	3 (1–7)	3 (1–6)	3 (1–6)	3 (1–7)
Early career specialists, n (%)	—	18 (31.6)	8 (13.8)	15 (10.1)	41 (11.2)
Sex, n (%)					
Women	71 (69.6)	40 (70.2)	46 (79.3)	67 (45.0)	224 (61.2)
Men	31 (30.4)	17 (29.8)	12 (20.7)	82 (55.0)	142 (38.8)

INTRODUCTION

According to the World Health Organization (WHO), sexual health is a state of physical, mental, and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships and the possibility of having pleasurable and safe sexual experiences free of coercion, discrimination, and violence.¹ The WHO also includes sexual health in the definition of overall health, well-being, and quality of life.^{1,2}

Studies have shown a high prevalence of sexual dysfunction in adult men and women.^{3–5} Therefore, doctors within various specialties should be prepared to deal with sexual health problems.

Expectations of what doctors can and should be able to do are shifting, knowledge is progressing fast, and doctors need to address different skills to respond to the new demands.^{6,7} Specialties dealing with sexual health problems in clinical practice include primarily urology, obstetrics and gynecology (OB-GYN), psychiatry, and endocrinology.⁸ Although the importance of sexual health training during medical school and postgraduate training has been highlighted, training programs and management of sexual health problems vary across specialties and countries.^{6,8–10} Despite previous studies conducted in psychiatry and urology gathering opinions from trainees concerning their training,^{10–12} little is known about the extent of sexual health training during training in these specialties.

AIM

The main objectives of this study were to explore (i) the extent of sexual health training during postgraduate training in psychiatry, OB-GYN, urology, and endocrinology across Europe; (ii) the confidence of trainees and early-career specialists in dealing with patients with sexual health problems; and (iii) their need for further training in sexual health during postgraduate training programs in the 4 medical specialties.

METHODS

This was an online cross-sectional questionnaire conducted in collaboration with European societies of trainees in 4 specialties: psychiatry (European Federation of Psychiatric Trainees),

OB-GYN (European Network of Trainees in Obstetrics and Gynecology), urology (European Society of Residents in Urology), and endocrinology (European Young Endocrine Scientists).

The survey was developed for this study with single-choice questions (about demographics), multiple-choice questions, and open questions (Supplement 1). The survey was divided into 3 parts—(i) demographic information, (ii) experience with and opinion of sexual health, and (iii) confidence in managing patients with sexual health problems—in 6 fictional scenarios about: gender dysphoria, history of sexual abuse, need for sexual therapy, paraphilic disorders, sexual dysfunction, and sexually transmitted infections (STI). The questionnaire was circulated using a web-based survey program (SurveyMonkey Inc, San Mateo, CA, USA). The survey was sent to trainees and early-career specialists within the 4 specialties from January 2015 through June 2016 by each of the societies to their contact database by e-mail and through their social media accounts. All participants were asked to give informed consent before initiating the questionnaire, which was self-administered anonymously. The questionnaire was distributed in the English language because trainees and early-career specialists were deemed to have sufficient command of English to reliably answer the questions.

1-way analysis of variance was used to test the relation between categorical and ordinal-interval variables. Dichotomous variables were compared using the unpaired t-test. Pearson correlation coefficient was used to assess the strength of relations between 2 ordinal-interval variables. The effect of trainee type on the confidence of managing patients with sexual problems (6 fictional scenarios) was tested using a general linear model, with age, sex, and years of training as covariates and specialization as a fixed factor. Tukey test was used to test differences between all pairs of trainee types. The error term for the Tukey test was computed from the sums of squared residuals from the general linear model. All presented *P* values are 2-sided. A *P* value less than .05 was considered statistically significant. GraphPad Prism 6 for Windows (www.graphpad.com) was used for all statistical analyses.

RESULTS

The survey was completed by 380 respondents. However, 14 were excluded because these respondents were from medical

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