

Free essay on female sexual dysfunction

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INTRODUCTION

Human beings are complex creatures, our biology, our psychology, and our physiology. Therefore it is not surprising that there are a plethora of diseases, disorders, and conditions that can cause a disruption in what is considered “normal” or “functional” in many aspects of life. One such area where dysfunctions and irregularities are particularly problematic is sexual dysfunction. For years we have heard a great deal about male “Erectile Dysfunction,” or ED. In response drug companies have developed a number of drugs, most notably, Viagra, to help combat the male inability to attain and maintain an erection (Harvard Medical School 1). However, far less study, efforts, and considerations have been taken to address the female sexual issues and dysfunctions. While male dysfunction, or impotence, has three major causes, however, the origins of female dysfunctions are far more complex and varied. The two are quite different and there is a call for greater understanding of the female sexual dysfunctions and means to address and improve its modern statistics.

DISCUSSION

For the most part male sexual issues extend from the aforementioned ED, but can, also, include ejaculation problems and low libido. However, while stress and poor health, can contribute, the bulk of male sexual dysfunction is easily identified, addressed, and treated (Rodriguez 1). Female Sexual Dysfunction is quite different and far more difficult to define. For women, sexual satisfaction is not as heavily dependent on the physical goal of orgasm, but on other relevant aspects, like desire, arousal, and gratification.

These are more abstract issues in female sexuality than is seen in their male counterparts (Harvard Medical School 1). Female sexuality has always been secondary in the societal paradigm. Generations of male dominance and female oppression has always made it easy to disregard female needs and wants. However, the reality is, is that female sexuality is by and large a mystery.

There is any number of physical, psychological, and environmental elements to female sexuality and, therefore, the causes and treatments for female dysfunctions are much harder to pinpoint (Harvard Medical School 1).

Women can also suffer from low libido due to hormonal imbalances and an inability to achieve climax, just as men do. However, there are other dysfunctions that are unique to women. Of course vaginal dryness can make sex unpleasant. Another possibility is painful intercourse without a specific cause. Modern experts admit that while conditions like, endometriosis, can led to painful sex, there are many other instances of pain that cannot be pinpointed or alleviated by any treatments (Rodriguez 1). Presently more than 45% of women suffer from one form of sexual dysfunction or another.

That said there is a serious need for deeper research and more effective approaches. While the treatable conditions that arise, like hormonal imbalances or treatable pain issues, there is still a need to understand the remaining, potentially dozens, of under-researched and under-addressed female sexual dysfunctions (Martinho Pereira, Arias-Carrión, and et al 1).

There is one theory offered in an article, originally discussed in 2002, by John Bancroft, that argues that while, sexuality is driven by spreading their DNA and reproducing, however, woman hold a greater responsibility in the caring

for and raising of these offspring. Women's body's, may be biologically programmed to shut-down when the situation is less than ideal. This means that there is a possibility that at least some types of female sexual dysfunction may not be actual dysfunction, but a natural biological reaction (Harvard Medical School 1). However, that does not account for all of the issues, particularly the ones that cannot be identified, which require greater consideration.

Granted there is an environmental element that must be considered that can impact the sex drive of both men and women in rather unpleasant ways. Some medications, particularly certain anti-depressants, can cause impotence issues in men and create diminish libido of women. That said there may be many environmental, biological, and medication related factors that can have a dramatic effect on sexual arousal and satisfaction of both genders (Rodriguez 1). There is a need for greater research into the effects these medications have and means to counter affect these undesirable effects. Beyond this there needs to be more dedicated research developed to address all of the divergent reasons that can cause sexual dysfunction in women, which in many ways, is still a mystery.

CONCLUSION

There has always been a difference in the perceived sexuality of men and women. In male dominant societies men consider sex to be a duty owed to them as men. While women's' sexuality has often been deemed irrelevant. After a woman need not reach orgasm or enjoy a sexual experience in order to reproduce. Therefore female pleasure has historically been seen as a secondary to the sexual appetites and desires of men. Many therapies that

work to help couples where the women suffers from the dysfunction include retraining of their partners, so to speak, to try different things and engage in activities that are more likely to stimulate a woman, like longer “ foreplay.” Between this “ retraining” and identifying any physical contributors that can be medically treated, there is a room for improvement in the issues of female dysfunction.

WORK CITED

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