

# Low Sexual Desire In Women: Breaking The Silence

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## CME Test Questions

Case # 1: Your new patient, a 49-year-old loan office clerk, who presents for an annual exam, has had diminished sense of well-being and persistent unexplained fatigue for several months.

1. For women under 50 years old, when would you take a sexual history?
  - a. Only when a patient has a sexual complaint
  - b. Only when a patient is being seen for a gynecological problem
  - c. During routine annual physical
  - d. At a routine visit for an unrelated problem

Case #1 (cont.): Her firm has recently downsized, and she has lost her job. Her husband owns a small business. Her only child recently married and moved away. She is currently taking zolpidem for insomnia (started last week) and a multivitamin. She leaves the sexual history portion of the patient history blank. When you comment on the lack of information, the patient shrugs and mumbles "I just don't care anymore." Upon further probing, the patient says "I've had no interest in sex for several months. I am less energetic and have lost my interest in almost everything that once was enjoyable. I think it's just stress."

2. What is the most likely cause of this patient's lack of interest in sex?
  - a. Hypoactive sexual desire disorder
  - b. Sexual arousal disorder
  - c. Depression
  - d. Perimenopausal hormonal change
  - e. Normal variation in sexual desire

Case # 2: Alice is a 55-year-old white female who is a new patient seeking treatment for high blood pressure. She has been married for 30 years and has

always had a good relationship with her husband, staying at home raising their four children. Her last menstrual period was 15 months ago and due to severe hot flashes she is on hormone replacement therapy. When questioned further about her sexual function, she notes that her sex drive is much less than before and “my husband feels rejected and upset, and it is starting to affect our relationship”. She hesitantly explains that she used to have “regular orgasms, but now they are much harder to come by, even with using a finger vibrator.” Further questioning indicates decreased frequency of sexual fantasies/masturbations. Physical exam, including a pelvic exam, is normal.

3. What is the most likely diagnosis in this patient?
  - a. Sexual aversion disorder
  - b. Orgasmic disorder
  - c. Hypoactive sexual desire disorder
  - d. Age-related cease in sexual activity
  - e. Depression
  - f. Normal variation in sexual desire

Case # 3: Ellen is a well-established 33-year-old teacher who presents for an annual exam and Pap smear. She has two children, ages 4 and 2, and her husband has two older children from a former marriage. At the end of the visit, she mentions that ever since her second child was born, her sex drive has not been the same, but assumes this is a normal part of parenthood and aging.

4. How likely are you to initiate further discussion with this patient regarding her lack of sexual interest?
  - a. Unlikely
  - b. Not sure
  - c. Likely
5. During history-taking, the patient expressed considerable concern about her low sexual desire and its effect on her marriage. What approach would you take to obtain a sexual history in this patient?
  - a. Avoid probing and follow the patient’s lead in discussing sexual concerns
  - b. Obtain a detailed sexual history at the present visit
  - c. Suggest a separate appointment to focus on her sexual concerns

Case # 4: At a routine annual visit, your 51-year-old patient reports that she has difficulty with sex. Her last menstrual period was 8 months ago. She has a boyfriend that she likes, but tends to avoid sex with him. On further questioning, she tells you that it hurts and also it is hard to have an orgasm. That is why she does not want to have sex. She is worried that her lack of interest in sex will destroy their relationship. She has had no prior surgeries and is taking an antidepressant (SSRI), propranolol, omeprazole, and a “stress” multivitamin.

6. Considering this patient's lack of interest in sex, besides any signs of infection, deep pain trigger points, and urinary leakage, all of the following findings, if present in pelvic exam, may contribute to her problem EXCEPT?
- a. Loss of elasticity
  - b. Dryness/atrophy
  - c. Abnormal pelvic floor muscle tone
  - d. Uterine position (anteverted vs. retroverted)
7. In addition to the SSRI, which of the following medications would you suggest modifying to improve this patient's difficulty with sex?
- a. Multivitamin supplement
  - b. Proton pump inhibitor
  - c. Non-selective beta-blocker
  - d. SSRI only

## CME Evaluation

### Low Sexual Desire In Women: Breaking The Silence

1. In your experience, what is the most significant barrier to your management of female sexual disorders?

- Lack of adequate training/comfort in taking a sexual history
- Lack of adequate training in management of sexual disorders
- Patients' embarrassment in talking about sexual problems
- Time constraints in dealing with sexual health issues

2. How many patients do you see per week who voice concern about change in their sexual desire?

- Less than 2
- 2-5
- 6-10
- 11-20
- More than 20

3. Overall, how do you rate the concept of CME presented on the Discovery Health Channel?

- Excellent
- Good
- Fair
- Poor

4. Was the topic relevant to your needs and interests?

- Yes
- No

5. Was the information presented useful in your practice?

- Yes
- No

6. Were the course objectives met?

- Yes
- No

7. Did you find the information presented on the program to be fair, balanced, and free of commercial bias?

- Yes
- No

8. If no, please state reasons:

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9. Are you interested in participating in future Discovery Health CME programs?

- Not at all       Somewhat       Very       Extremely

10. Please list topics and/or therapeutic categories you would be interested in seeing on future Discovery Health CME programs:

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