# **CHANGES IN SEX LIFE AFTER CHILDBIRTH**

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#### **SUMMARY**

**Background**: Childbirth is major event in the life of closer and extended family. The aim of this study is to explore sex desire after childbirth and challenges for usual rhythm of intercourse.

Subjects and methods: We studied 113 women who filled up questionnaire at the follow up examination. Inclusion criteria were: all women were secundigravidae and time between pregnancies was more than a year. Women anonymously filled out a survey with question on the time before first intercourse after delivery, frequency of sexual intercourse after delivery, sexual desire after delivery, sexual desire of partner after delivery, reasons for postponing sexual intercourse after delivery and frequency of intercourse in the first year after delivery.

**Results:** Most women had same number of intercourse after delivery like before pregnancy (Hi-square test:  $\chi^2(2)=22.04$ , p<0.0001). Significant proportion of women find their partners sexual desire to be the same like in the pre-pregnancy period (Hi-square test:  $\chi^2(2)=64.64$ , p<0.0001). Most women had intercourse once a week (several times a month) during first year after delivery (Hi-square test:  $\chi^2(3)=91.93$ , p<0.001). Fatigue, sleep deprivation, bad mood and lack of time are the most common reasons for intercourse postponement. Most women find life conditions to be very good. They do not find that they neglect their children and partners find them attractive.

**Conclusion:** Sex life after delivery is still taboo in most countries. Women should have the information that sex life after delivery will turn to normal after a certain time.

Key words: pregnancy - secundigravidae - sexintercourse - sexual desire

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## **INTRODUCTION**

Childbirth is major event in the life of closer and extended family but the lifestyle of the parents is most affected. Most of the routines are changing as well as priorities. In most cases mother states with the child and takes care for all child's needs. All this influences the intimate life of the couple. Sometimes men are even jealous and afraid of lack of intimacy (Sleep 1986, Khajehei et al. 2015, Mann et al. 1999). On the other hand, women need time to recover from physical and psychological stress they have been put through, in order to regain sexual desire.

The aim of the study was to examine sexual desire after delivery and obstacles standing in a way of reinstatement of previous rhythm of intimacy.

## SUBJECTS AND METHODS

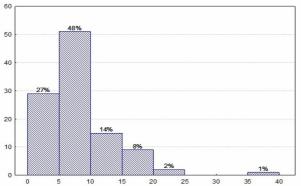
The study included 113 women. The study was designed as a cross sectional study conducted in the Department of Gynecology and Obstetrics, Sestre milosrdnice University Hospital Center, Zagreb, Croatia. Inclusion criteria were: all women were secundigravidae and time between pregnancies was more than a year. The study was approved by the Hospital Board of Ethics. Onehundred and thirteen women participated in the study, of which there were 66 pregnant women (58.4%) in second pregnancy and 47 parturient women (41.6%) that were admitted to the maternity ward for the delivery of their second child. Women anonymously filled out a survey with question on the time before first intercourse after delivery, frequency of sexual intercourse after delivery, sexual desire after delivery, sexual desire of partner after delivery, reasons for postponing sexual intercourse after delivery and frequency of intercourse in the first year after delivery.

#### Statistical analysis

Descriptive analyses were used to examine the average weight gain in pregnancy and one year after the delivery. ANOVA was used to test the differences in the weight gain and weight difference one year after delivery in respect to education level, place of residence. P value was set to 0.05. All statistical analysis was performed using the SPSS version 20.0 for Windows.

#### RESULTS

Most of the women (97.3%) continue to have sex in the first 6 months, but two women did not have sex for 6 years. When these two extremes are excluded, the average time to first intercourse is 8 weeks after delivery (C=8 (median), span 1-36 weeks) (Figure 1).



**Figure 1.** Time before first intercourse after delivery (N=111)

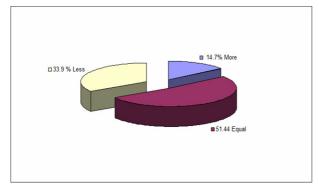


Figure 2. Frequency of sexual intercourse after delivery

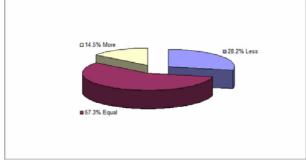


Figure 3. Sexual desire after delivery

Most women have same frequency of sexual intercourse after delivery like they had before pregnancy (Che squere test:  $\chi^2(2)=22.04$ , p<0.0001) (Figure 2). Most women have same sexual desire after delivery like they had before pregnancy. (Che squere test:  $\chi^2(2)=31.44$ , p<0.0001) (Figure 3).

Most women assessed sexual desire of the partner to be same as before pregnancy (Che squere test:  $\chi^2(2)=64.64$ , p<0.0001) (Figure 4).

The obstacles for sex intercourse after delivery are presented in Table 1.

The frequency of the sexual intercourse after delivery is showed in Figure 5. Most of the women had sexual intercourse about once a week or several times a month through first year after delivery (Che squere test:  $\chi^2(3)=91.93$ , p<0.001).

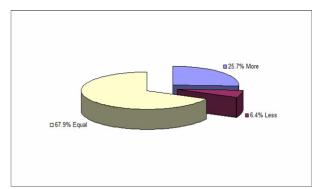


Figure 4. Sexual desire of partner after delivery

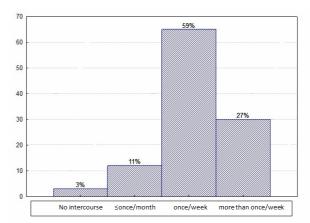


Figure 5. Frequency of intercourse in the first year after delivery

Table1. Reasons for postponing sexual intercourse after delivery	7
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	Never	Sometimes	Often	Always
Vaginal dryness (N=108)	62 (57.4%)	43 (39.8%)	3 (2.7%)	0
Pain (N=109)	49 (45.0%)	48 (44.0%)	12 (11.0%)	0
Fatigue (N=110)	18 (16.4%)	61 (55.5%)	29 (26.4%)	2 (1.8%)
Sleep deprivation (N=110)	25 (22.7%)	52 (47.3%)	31 (28.2%)	2 (1.8%)
Bad mood (N=109)	36 (33.0%)	61 (56.0%)	11 (10.1%)	1 (0.9%)
Lack of privacy (N=108)	60 (55.5%)	34 (31.5%)	11 (10.2%)	3 (2.8%)
Busyness (n=109)	36 (33.0%)	51 (46.8%)	18 (16.5%)	4 (3.7%)
Feeling unattractive (N=108)	80 (74.1%)	25 (23.1%)	3 (2.8%)	0
The fear of neglecting this child (N=108)	88 (81.5%)	18 (16.7%)	2 (1.9%)	0
Lack of desire (N=110)	48 (43.6%)	52 (47.3%)	7 (6.4%)	3 (2.7%)
Inadequate living conditions (N=107)	97 (90.7%)	5 (4.7%)	4 (3.7%)	1 (0.9%)

## DISCUSSION

Most couples do not start with sexual intercourse two months after delivery. Interest for sexual activities seems to be reduced for some time after delivery compared to pre-pregnancy period. This can result in interpersonal tension and frustration (Von Sydow 1999).

Sexual activities start somewhat earlier than actual intercourse. One relevant study with 1500 cases found that most women (two thirds) try vaginal intercourse two months after delivery and 6% wait even 6 months. Same study found that women with episiotomy, perineal rupture and assisted vaginal birth or Cesarean section wait longer than 6 weeks for the first intercourse and sexual activities (McDonald & Brown 2013). Some studies did not find influence of these procedures to start of sexual activity (Bello et al. 2011).

Most studies on sexual habits after delivery concentrate on women, while very few studies investigate their male partners (van Anders et al. 2013). The factors that influence sex life after delivery seem to be more complex than most commonly studied physical changes like vaginal trauma or breastfeeding. So, postpartum sexuality seems to be a multidimensional phenomenon that needs to be investigated in that context (Hipp et al. 2012).

Pain is most common discomfort reported in studies and 67% of women had pain in some extent during an intercourse after delivery (Kabakian-Khasholian et al. 2015). In our study 55% of women had occasional of frequent pain during an intercourse after delivery. Most common reasons to avoid intercourse after delivery were fatigue, sleep deprivation, bad mood and lack of time.

In our study women are satisfied with their life and their partners find them attractive. They spend enough time with their children. One study found that about two thirds of women had some kind of sexual dysfunction in the first year after delivery and over half of them had difficulties in achieving orgasm (Khajehei et al.2015). According to this study four of five women had sexual desire disorder. However, in our study less than one third of women stated decreased sexual desire and fifteen percent stated even increased sexual desire. Most of the women in the study had good living conditions with secured privacy and intimacy. Decreased sexual desire could be explained by neuroendocrine changes in postpartal period (Rupp et al. 2013). Depression could be partly responsible for these results because it could be reactivated or can occur in postpartal period (Chivers et al. 2011). Impression of partner's sexual desire by the women in this study is to be the same as before delivery and corresponds with results in other studies (Nezhad et al. 2011).

All the data in this study were collected in gynaecological ordination by gynaecologist.

It is very important to advise women about sexual behaviour after delivery and appropriate contraception method. Partner should be included (Khajehei et al.2015, Nezhad et al. 2011, Rossier et al. 2014, Adeniran et al. 2015). Duration of delivery, mode of delivery, intrapartal injuries of birth canal or uterus, breastfeeding and overall satisfaction with personal in delivery room should be noted (O'Malley et al. 2018).

## CONCLUSION

The women should be informed about postpartal changes that may interfere with sexual desire. Some of these changes are physical like neuroendocrine changes and some are psychological. Partner should be included in consultations.

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Conflict of interest : None to declare.

### Contribution of individual authors:

- Hrvojka Soljačić Vraneš: Study design, Statistical analysis Interpretation of the data;
- Ivka Djaković: Writing the manuscipt, Interpretation of the data, Literature searches, Drafting the manuscript;
- Hrvoje Vraneš: Acquisition of data, Statistical analysis;

Marija Vrljičak: Acquisition of data;

Zdenko Kraljević: Interpretation of the data.

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