

# Sexual Advice Association

Suite 301 Emblem House, London Bridge Hospital, 27 Tooley Street, London SE1 2PR  
Helpline 020 7486 7262  
Website [www.sexualadviceassociation.co.uk](http://www.sexualadviceassociation.co.uk)  
Email [info@sexualadviceassociation.co.uk](mailto:info@sexualadviceassociation.co.uk)



## Painful sex or dyspareunia

Pain during or after sex is known as dyspareunia (**dys par eunia**) (*see also the factsheet 'Vaginal dryness'*). Women with dyspareunia may have pain in the vagina, clitoris or labia. It can also be classed as superficial (at the entrance of the vagina) or deep (felt on deep penetration) depending on the site of the pain. Some women may also have severe tightening of the vaginal muscles during penetration, a condition called **vaginismus**.

### Superficial dyspareunia

Common causes and their treatments include the following:

- **Poor arousal and/or lubrication.** If you have increased clitoral stimulation before sex, or use a lubricant which you can buy over the counter it will help. Water based lubricants are better than oil based ones such as Vaseline or baby oil as these will damage ordinary latex condoms. This can lead to a sexually transmitted disease or an unplanned pregnancy. Women who have dryness of the vagina after the menopause may need oestrogen tablets, creams and pessaries which are put directly into the vagina.
- **Spermicides and/or latex condoms.** Some women find that these cause irritation or they may even be allergic to them. If this is the case they should ask their partner to use special non-latex condoms which are easily available.
- Infections such as **thrush** (candida) or sexually transmitted diseases. You will need to be checked by a doctor and you will be given treatment depending on the type of infection.
- **Vulvar vestibulitis** is a condition where there is pain at a specific place at the entrance of the vagina. Its cause is unknown. Avoiding soap, shampoo and other irritants may help. **Tight fitting underwear or jeans** may irritate the area and you should avoid condoms lubricated with a spermicidal. Many specific treatments for vulvar vestibulitis are used, but there is a lack of high quality research. Local anaesthetic creams may relieve pain during sex. Low dose pain medications, steroid creams, behavioural therapy and as a last resort, surgery are used. The good news is that the condition can get better on its own in up to 50% of women.
- **Vulvodynia** is a condition where pain is felt over a wider area and can extend to the anal (back passage) region or to the upper thigh. Again its cause is unknown. Avoiding soap, shampoo and other irritants may help. Pain medications and some antidepressants may also help. Local anaesthetics are not generally helpful as they only provide very short-term relief.
- **Skin conditions** include dermatitis and lichen sclerosis. Treatment will depend on the type of disease and steroid creams may be recommended.

## Deep dyspareunia

While the pain may be due to lack of arousal it may be due to diseases in the pelvis. These include:

- **Pelvic inflammatory disease (PID).** This is caused by an infection such as thrush (chlamydia) or gonorrhoea. As well as having pain you might have a vaginal discharge or bleeding or even a temperature. Treatment depends on the type of infection.
- **Endometriosis.** This is an often painful condition in which seedlings of tissue from the lining of the womb (endometrium) are also present in the pelvis outside the womb. Symptoms include cyclical or chronic pelvic pain and painful and heavy periods. Treatment depends on how bad the disease is and may involve medication or surgery.
- **Pelvic adhesions.** These can arise after surgery or radiotherapy and may require surgery.
- **Fibroids.** These are common benign muscle tumours of the womb. They can also cause heavy painful periods. Treatments include surgery.
- **Irritable bowel syndrome.** Some women with this condition may have deep dyspareunia.
- **Pain depending on your sexual position.** Sometimes deep thrusting can cause pressure on the ovary, producing pain. It can be eased by changing the way you lie. This should also be considered especially if tests are normal.

Finally dyspareunia may stem from a past history of sexual abuse or trauma. You may need psychosexual counselling. You can be referred for sex therapy by your GP or other health professional. Some therapists will take self referrals. Therapy can be obtained thorough the NHS or privately. It is important to make sure that the therapist is qualified and abides by the codes of ethics of an appropriate professional body. Look for a therapist who is a member of the Institute of Psychosexual Medicine ([www.ipm.org.uk](http://www.ipm.org.uk)) or the The College for Sexual and Relationship Therapy ([www.cosrt.org.uk](http://www.cosrt.org.uk)).

## An invitation

..... to enrol as a friend of The Sexual Advice Association. For a small annual subscription you will know that you are contributing to a charity that helps overcome the problems of male and female sexual dysfunction. If you are interested please telephone 020 7486 7262 or write for an application form or complete our on-line registration form.

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