

# How To Make Up For Declining Hormones

**DEAR DR. SCANTLING,**  
I'm a vibrant (post-menopausal) 54-year-old woman involved in a very loving and most satisfying



DR. SANDRA SCANTLING  
INTIMACY, SEX & RELATIONSHIP

relationship with a man. He's not only wonderful to me, but he's by far the best lover I've ever had ... passionate and patient. My problem is that I can hardly attain orgasm anymore. When I do, it's weak — like a hiccup — certainly not what I was used to during my pre-menopausal days. I must admit that I'm feeling a little blue about all of this. My gynecologist tells me I simply need more foreplay, but I can't feasibly add an extra hour to foreplay — it would prove to be exhausting for both of us. Men have Viagra. Is there anything comparable for a woman? Can you recommend anything? I certainly can't be the only post-menopausal woman suffering from this. Please help me.

— Jeannette, Farmington

**DEAR JEANNETTE,**

You are certainly not alone. Many women tell me that their orgasms don't have the same "zing" after menopause.

Female orgasm is complex. Unlike men, who have perfected an efficient formula of friction and fantasy, women need all systems to be "go" before they experience "lift-off." As we age, this becomes even more challenging. More time or more stimulation isn't a surefire prescription. In fact, some women just get dry, numb and bored long before their partner gets exhausted.

To keep orgasms alive, we have to do our best to stay healthy — in mind, body and spirit. Middle-aged women have come a long way since our grandma's days, when she rolled her stocking comfortably below her knees and wore sensible tied shoes. Have you tried to find a pair of comfortable shoes recently? I dare you to show me a pair in Vogue.

Boomers of today have over-40 Olympians as role models! The downside, if there is one, is that this 50-is-the-new-40 view has increased intolerance for bodily imperfection, putting even more pressure on today's women. Determined to combat gravity and inflexibility, they attend multiple spinning classes a week, grueling sessions with personal trainers and round it off with some Bikram Yoga. But even if your body and heart are in A-1 shape, when our ovaries tick their last tock, sex hormones go into free fall. Declining hormones can lead to

diminished desire, change in erotic sensitivity, decreased blood flow to the genitals, vaginal dryness and (for many women) less intense orgasmic release.

There are several hormonal (and non-hormonal) products on the market that purport to alleviate these problems, but proceed with caution — just because something is labeled "natural" or "herbal" doesn't guarantee its safety.

Here are a few other hints:

▶ Stay as healthy as you can.

Correct any medical or hormonal imbalances. Don't smoke, moderate your caffeine intake, exercise, watch your diet and make time for all kinds of pleasure.

▶ Stop your distracting mind

chatter. Focus on whatever turns you on. Practice thinking sexy thoughts during the day — just for the fun of it.

▶ Don't "chase" your orgasm.

Follow your pleasure, and ride it like a wave.

▶ Don't get stuck with one way to orgasm. Just because your vibrator has always worked doesn't mean it has to be your only toy. And remember to share your toys with your lover.

▶ Lubrication is a good thing — so experiment. Look carefully at products that claim to increase heat or tingle, however, as the ingredients may irritate or numb both of you.

On the medical side, there are finally more research dollars going toward the investigation of drugs to enhance female sexual response. Women who have either gone through menopause or had their ovaries removed may be eligible for a current research study for a topical testosterone gel especially formulated for women. If you're interested in learning more, check with your physician first, and then

*Even if your body and heart are in A-1 shape, when our ovaries tick their last tock, sex hormones go into free fall.*

call 877-Bloom-81 to see if you meet the criteria.

But the most challenging part of sexuality, by far, is the mind. Depression is reported to affect between 8 percent and 15 percent of all menopausal women and certain antidepressants can impair sexual desire, arousal and orgasm. But there is some good news in this regard. According to a new study in the Journal of the American Medical Association, pre-menopausal women on antidepressant medication who take Viagra report less difficulty

reaching orgasm when compared to those taking placebo drugs.

Being a sexy fifty- or sixtysomething takes a different attitude. It requires we accentuate the positive. If you have great legs — flaunt them. Think about the fantasies you wish you had the nerve to tell your lover and finally say it. If not now, when? Men understand how important variety is to pleasure. Women seem to think that the old standards should always hit the spot. How would you like a perfectly juicy tender filet mignon — every single night?

So don't despair, Jeannette, all is not lost. What we tell ourselves (or what we imagine) before, during or after sex is the most potent aphrodisiac. The key to more satisfying orgasms is learning to deepen your pleasure skills. This doesn't take more time, it takes know-how.

*Dr. Sandra Scantling is a licensed clinical psychologist and certified sex therapist in Farmington. You may e-mail her at AskDrScantling@aol.com; her website is www.drscantling.com. This column is not intended as a substitute for professional, medical or psychological advice. Case material used here includes composites and is not intended to represent any actual individuals.*