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**New Study Pinpoints Timing for Decline in Sexual Function Over the Menopause Transition**

*SWAN data shows that black women have a lower drop in sexual function, whereas the drop in Japanese women is twice that of white women*

CLEVELAND, Ohio (November 2, 2016)—Although most medical professionals (and their patients) agree that sexual function declines with age, there remains debate about the contribution of menopause to sexual activity and functioning. A new study using data from the Study of Women’s Health (SWAN), however, provides a more detailed timetable of sexual decline over the menopause transition. The study is being published online today in *Menopause*, the journal of The North American Menopause Society (NAMS).

Sexual function data was gathered from nearly 1,400 women who were in either the natural menopause or hysterectomy groups of the SWAN study. No decline in sexual function was documented until 20 months before the final menstrual period. From this time until one year after the final period, sexual function scores decreased by 0.35 annually and continued to decline more than one year afterward but at a slower rate. The decline was smaller in black women and larger in Japanese than in white women. Women who had a hysterectomy before the final menstrual period did not show a decline in sexual function before surgery but did experience a decline afterward. In total, sexual decline persisted for five years after the final menstrual cycle.

Although menopause is often accompanied by such related symptoms as vaginal dryness, depression, and anxiety, these factors did not explain the effect of menopause or surgery on sexual function. The problem of declining sexual function is a serious one, because more than 75% of the middle-aged women in the study reported that sex was moderately to extremely important.

“This study highlights the need for healthcare providers to have open conversations with their patients about their sexual issues, because there are many options for women to help maintain or improve their sexual lives as they transition to and beyond menopause,” says Dr. JoAnn Pinkerton, NAMS executive director. “Low-dose vaginal estrogen, for example, which has minimal risks for most women, is an effective and safe treatment for painful intercourse as is a non-estrogen therapy called ospemifene.”

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Founded in 1989, The North American Menopause Society (NAMS) is North America's leading nonprofit organization dedicated to promoting the health and quality of life of all women during midlife and beyond through an understanding of menopause and healthy aging. Its multidisciplinary membership of 2,000 leaders in the field—including clinical and basic science experts from medicine, nursing, sociology, psychology, nutrition, anthropology, epidemiology, pharmacy, and education—makes NAMS uniquely qualified to serve as the definitive resource for health professionals and the public for accurate, unbiased information about menopause and healthy aging. To learn more about NAMS, visit [www.menopause.org](http://www.menopause.org).