

PREVALENCE OF FEMALE SEXUAL DYSFUNCTION AMONG WOMEN SUBMITTED TO CAESAREAN SECTION IN BRAZIL

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WHO 2008
Fonds Universitaire Maurice Chalumeau Scholarship





INTRODUCTION

 In Brazil more than 30% of all childbirths are delivered by Caesarean section (BEMFAM, 1997; STANTON, 2006).





NON-CLINICAL REASONS FOR CAESAREAN

- Female sterilization performed at the same time as the Caesarean section
- Fear of childbirth
- Preservation of sexual function and sexual attractiveness (BARROS et al. 1991; FAÚNDES, CECATTI 1991; FAÚNDES, CECATTI 1993).





MEDICAL LITERATURE

- Vaginal childbirth as cause of flaccid vaginal muscles
- Woman's sexual attractiveness
- Caesarean section as prophylactic procedure (DINIZ 1996; DAVIS-FLOYD 1994; DINIZ 2006).





FEMALE SEXUAL PROBLEMS

Psychological suffering - essential point Sexual functioning model

dysfunction of desire, excitement, orgasm and pain disorders (BASSON et al 2000).

Based on aetiology

socio-cultural, political or economic factors, relating to partner and relationship, psychological factors or due to medical factors (TIEFFER et al 2002).





SOCIAL CONSTRUCTION

Perception and feelings about their body and sexuality

Cultural X Biological

More important than presence of objective evidence of perineal relaxation





EVIDENCE

Caesarean section

- Medical procedure X Social practice
- Different meanings and discourse
- "Vaginal delivery may affect negatively the woman's sexual life".

No scientific evidence for a protective role of Caesarean section in female sexual dysfunction (KLEIN et al., 2005; BOTROS et al., 2006; BRUMMEN et al., 2006; GUNGOR et al., 2007; BASAK et al., 2007).





RATIONALE

High rates of Caesarean section

- medicalization of women's health
- several causes and origins

Deconstruction of what is said and of social practices

 different meanings about Caesarean in Brazil (POTTER et al., 2001)





OBJECTIVES

General

 Investigate the prevalence of female sexual dysfunction among women in Brazil according to their different delivery modes.

Specific

- Identify the prevalence of sexual dysfunction among women who underwent one Caesarean section.
- Identify the prevalence of sexual dysfunction among women who underwent repeated Caesarean sections.
- Identify the prevalence of sexual dysfunction among women who underwent vaginal delivery.





This study is designed to be both a quantitative and qualitative study

- A cross-sectional study
- In-depth interviews





MY GRATITUDE TO

- GFMER
- Robert Thomson
- WHO staff
- Lecturers
- Colleagues



THANK YOU

