

WHAT HAPPENS TO SEXUALITY OF WOMEN DURING LACTATION PERIOD? A STUDY FROM IRAN

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ABSTRACT

Objective: To compare the association of sexual activity and breastfeeding women within 2-6 months after child birth.

Methodology: This study was carried out in 2007. The sexual activity of 258 breastfeeding women was compared with 198 bottle-feeding women referred to a public maternity health care center in Tehran. Women in the age of 20-35 years were enrolled in the study after their first or second child and 2-6 months after birth. A self-structured questionnaire was used for data collection. Women were interviewed face-to-face by the first author.

Results: Of 456 respondents, 258 were currently breastfeeding and 198 were bottle feeding. Mean age of the mothers was 27±4.7 years. About 28.3% of breastfeeding women and 22.9% of non breastfeeding women had sexual intercourse within one month of postpartum period. No significant difference was found between breastfeeding and bottle-feeding women on sexual desire and satisfaction before pregnancy and in postpartum period (p: 0.1, p: 0.5). The orgasm experience did not have a significant difference between the two groups during postpartum (p: 0.4).

Conclusion: We did not find significant difference in sexual activity between breastfeeding and non-breastfeeding women. Sexual history taking and counseling in antenatal class as well as postpartum period are suggested for the clients.

KEY WORDS: Sex, Breastfeeding, Satisfaction.

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INTRODUCTION

There are specific effects during pregnancy and Post-partum period affecting women's sexual lives. The majority of women reported a decline in sexual activity and interests during pregnancy as well as lactation period.¹ There are also other changes both physiological and psychosocial which affect women's sexuality,²⁻³ and make the explanation of the facts even difficult.¹

Common issues affect sexual lives of women such as dyspareunia due to episiotomy, breastfeeding, vaginal dryness, first mothers concerns (i.e baby care during night time) and vaginal infections and bleeding.⁴ However the reverse effects of breastfeeding on sexuality of

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women has remained. doubtful The studies by Kayner et al have highlighted some negative impacts of lactation on women's sexual desire and painful intercourse as well as feeling fatigue and weakness through their daily life.⁵ Low rate of sexual desire and activity in postpartum period among nursing mothers have been reported by a number of studies.^{6,7} Alison et al pointed out that lactation is an erotic phenomenon in potential. Other reports show intense physical exchanges such as skin touching, hands stroking, hormone pulsing and intimacy-related factor's.⁸ In line with this report Master and Johnson confirmed the rapid return of sexual desire and activities during lactation.⁹ Like many other societies, in Iran, pregnancy, childbirth and lactation are considered much more important events in a woman's life than her sexuality. On the other hand sexuality is an unspoken issue in general and is undermined during pregnancy and lactation in particular.

In this study we aimed to compare two groups of women: breastfeeding and bottle-feeding in their sexual desire, satisfaction, activity (frequency of intercourse) and time of resumption in 2-6 months after childbirth.

METHODOLOGY

This causal-comparative study was carried out from April to December in 2008. Two groups of women: breastfeeding (n= 258); bottle-feeding (n= 198) were enrolled in this study. These women were matched in age (20-35 years old); postpartum period (2-6 months after delivery); and parity (1st or 2nd pregnancy). All women were interviewed by the first author in a public maternity health care center.

The study protocol was approved by research ethics committee of Shahed University and informed consent was obtained from all participants before enrollment. Study population consisted of (case) and (control) women. The time of resumption of sexual intercourse, number of intercourses in a month, sexual desire and satisfaction and experience of orgasm and dyspareunia and vaginal dryness were compared between the two groups. Sample size calculated

according to the pilot study was 243 for case and control groups. During six months of the study in a public maternity health care center in Tehran 258 breastfeeding and 198 bottle-feeding women were selected who fulfilled the inclusion criteria. Women referred to the clinic 420 breastfeeding women were invited to fill out the questionnaire. Of 420, 258 women with breastfeeding consented to participate in the study. Only 198 women with bottle-feeding from 250 women participated. A trained midwife interviewed women individually in a private room. All women were explained about the aim of the study and asked for written consent. The reason for lower number of bottle feed women is the emphasis on exclusive feeding with breast milk in the first six months of postpartum.

The questionnaire contained personal characteristics, socioeconomic condition and questions on sexual activity in postpartum and context validity method was used to determine the scientific validity of it. First, the questionnaire was prepared using books and scientific journals and then asking the opinions of some professors, it was modified. In order to determine the reliability of the questionnaire in this study, we used test-retest method. The questionnaire was completed by ten breastfeeding women. Then ten days later, again they completed the questionnaire and after data gathering using Pierson test, the correlation coefficient was acquired 98%. So the reliability of the questionnaire was desirable. It must be mentioned that these ten women were excluded from the study population. The questions were answered via verbal interview and the data was analyzed using SPSS and descriptive statistics and Chi² test (p<0.05).

RESULTS

Study was carried out on 258 breastfeeding and 198 bottles feeding women. Breastfeeding women were similar with bottle-feeding in term of age, occupation, education, socioeconomic condition, parity and type of delivery (Table-I).

Table-I: Characteristic of breastfeeding and bottle-feeding women

<i>Characteristic</i>	<i>breastfeed</i> n=258 (%)	<i>bottle-feeding</i> n=198 (%)	<i>P value</i>
Age			0.2
18-24	101(39.1)	62(31.8)	
25-30	96(37.2)	85(43.6)	
> 30	61(23.6)	48(24.6)	
Occupation			0.9
Housekeeper	201(77.9)	152(78.1)	
Occupying	57(22.1)	46(21.9)	
Education			0.6
Under diploma	32(12.4)	39(19.9)	
Diploma	146(56.6)	107(54.6)	
Higher diploma	50(31)	80(25.5)	
Socioeconomic			0.2
Lower than sufficient income	32(12.2)	34(17.4)	
Sufficient income	213(83.1)	152(77.4)	
More than Sufficient income	13(4.7)	11(5.1)	
Parity			0.4
One	170(88)	132(67)	
Tow	88(34.2)	66(33)	
Type of delivery			0.5
Vaginal+episiotomy	78(30.2)	62(30.9)	
cesarean	18(69.8)	136(69.1)	

Data are presented as n (%)

The time of resumption of vaginal intercourse and the average number of intercourses in a month, sexual desire and satisfaction, orgasm experience, dyspareunia and vaginal dryness in breastfeeding and bottle-feeding women during postpartum was compared before pregnancy, is shown in (Table-II). There was no significant difference between two groups in time of resumption of vaginal intercourse in postpartum (p: 0.07). There was significant difference between two groups in frequency of vaginal intercourse in a month during postpartum (p: 0.02). No significant difference was indicated between two group's women on sexual desire in postpartum versus before pregnancy (p: 0.1). Results showed that in 49.8% of breastfeeding and 43.3% of bottle-feeding women, sexual desire had decreased. Sexual satisfaction of breastfeed and bottle feeding women during

postpartum compared before pregnancy did not have a significant difference (p: 0.5) so that sexual satisfaction was decreased in 32.6% of breastfeeding women and 33% of bottle feeding women. Experience of orgasm did not have a significant difference between the two groups in postpartum and before pregnancy (p: 0.4) as 65.7% of breastfeeding women and 64% of bottle feeding women experienced orgasm in postpartum period. Also no significant deference was found between breastfeeding and vaginal dryness and also dyspareunia (p: 0.7 and p: 0.2, respectively) so that 43.2% of breastfeeding women and 35.8% of bottle feeding women had vaginal dryness and 62.4% and 66% had dyspareunia, respectively.

According to the result of breast feeding participants low sexual desire due to negative effect of breastfeeding on sexual activity was

Table-II: Sexual health characteristic of breastfeeding and bottle-feeding women during 2-6 month of postpartum

<i>Sexual characteristic</i>	<i>breastfeeding N=258 (%)</i>	<i>bottle-feeding N=198(%)</i>	<i>P.value</i>
Frequency of intercourses in a month			0 .02
Lower of 4 times	138(53.5)	85(43.4)	
4 and more than 4times	120(46.5)	113(56.6)	
Resumed intercourse			0.07
During 6 weeks of childbirth	73(28.3)	45(22.9)	
More than 6 weeks of childbirth	185(71.7)	153(78.1)	
Desire			0.1
Same prepregnancy	130(50.4)	112(56.7)	
Reduced	128(49.6)	86(43.3)	
Satisfaction			0.5
Same prepregnancy	174(67.4)	132(67)	
Reduced	84(32.6)	66(33)	
Experience orgasm			0.4
Yes	169(65.7)	127(64.6)	
No	89(34.3)	71(35.4)	
Dyspareunia			0.1
Yes	161(62.4)	97 (37.6)	
No	131(66.8)	67(33.2)	
Dryness vaginal			0.06
Yes	112(43.2)	146 (56.8)	
No	72(35.8)	126 (64.2)	

Data are presented as n (%)

reported in 81(31.5%), effect of fatigue caused by breastfeeding on sexual activity in 98 (38.1%), distortion of body style caused by breastfeeding in 122 (7.47%) and milk discharge during intercourse in 37(14.4%) cases.

We did not give women any instruction about sexual activity, because we wanted to find out their own experience of sexual and tension values. Almost 35% of breastfeeding women and 33.9% of non breastfeeding women stated that they need instructions about sexual activity in postpartum period.

The results also showed that there is no significant difference between type of delivery (vaginal and cesarean) and sexual desire (p: 0.5), satisfaction (p: 0.5), number of intercourses (p:0.4), time of resumption of sexual activity (p:0.07) and dyspareunia (p: 0.6) during 2-6 weeks postpartum.

DISCUSSION

This study indicated that rather 28.3% of breastfeeding women and 22.9% of non breastfeeding women resumed their sexual activity in one month after childbirth and there was not a significant difference between two group's women in the time of resumption. In Grudzinsaks and Atkinson study on 328 breastfeeding women, the resumption was 55.6% after five weeks of postpartum and there was no significant deference between being breastfeeding and time of resumption¹⁰ Egbuonu in his research on 178 Nigerian mothers showed that 31.6% of breastfeeding mothers had resumed vaginal intercourse within six weeks of postpartum.¹¹

Desgrees-du-lou in his research on breastfeed women during 2000-2001 indicated that mean

time for resumption of vaginal intercourse after delivery was 11 months of postpartum and women were not inclined to resume sexual activity and they just did it to avoid their husbands making new sexual relationships.¹² In Connolly's research on 150 women living in North Carolina about the effects of delivery on sexual activity, showed that in 6, 12 and 24 weeks of postpartum 57%, 82% and 90% of women resumed vaginal intercourse.¹³ Odar in a study on 217 Ugandan women showed that 66.4% women resumed their sexual activity within six months of postpartum and 22.2% suffered from sexual disorders in this period¹⁴ Woranitat in a research on 80 women studied sexual activity in postpartum. The results showed that 35% of women had resumed vaginal intercourse within six weeks of postpartum. Resumption of vaginal intercourse in postpartum did not have a significant relation with the type of delivery and the most effective factors in resumption was the husband's request¹⁵ Robson in a longitudinal study on 119 breastfeeding, first child women showed that 83% resumed vaginal intercourse within six weeks of postpartum and almost all of them had intercourses in three months of postpartum. It was also disclosed that the number of intercourses was decreased compared with before pregnancy.¹⁶

The small number of women resuming intercourse during six weeks of childbirth (breastfeed 28.3%-bottle-feed 22.9%) in our study can be due to abstinence for six weeks. This is a religious order to avoid sexual intercourse until six weeks. the period women has vaginal bleeding.

Reported low sexual desire (49.8%) in breastfeeding participant in this study can be because of poor sexual counseling during antenatal care but other studies highlighted many factors for breastfeeding women sexual problem such as vaginal dryness, vertigo, lack of sexual attractiveness, itching after intercourse.^{4,17-19}

According to our participants the changes in sexual desire in breastfeeding and non breastfeeding women in postpartum, showed

that 49.8% and 43.3% had decreased sexual desire respectively comparing with before pregnancy. Results also showed that sexual satisfaction had decreased in 32.6% of breastfeeding and 33% of non breastfeeding women. In several studies, results showed that breastfeeder's had decreased sexual desire during postpartum.^{5,20-23} The results of this study have a significant difference with those of Master and Johnson's who believe that sexual desire in breastfeeding women increases in postpartum.

Our results showed that 34.4% of breastfeeding and 35.4% of non breastfeeding women did not experience orgasm in postpartum. The other studies, showed that breastfeeding women reach orgasm early in postpartum. However, Master and Johnson believe that lactation causes sexual stimulation in women and breastfeeding women have the highest sexual desire and ability to reach orgasm.^{13,16} Almost 35% of breastfeeding and 33.9% of non breastfeeding women stated that they needed some instructions about sexual activity in postpartum. In several studies, the necessity of sexual consultations in maternity clinics during postpartum has been confirmed.^{2,16,23}

This study has showed that the type of delivery did not have a significant deference with sexual activity during postpartum. In several studies, results showed that there was no significant deference between the type of delivery and time of resumption of vaginal intercourse and sexual function (sexual desire, stimulation phase, orgasm and sexual satisfaction) and women who had vaginal delivery with episiotomy suffered from more pain during intercourse.^{15, 24, 25}

CONCLUSION

According to the results of this study, it can be said that breastfeeding and bottle-feeding women encountered decreased sexual desire and satisfaction in comparison with before pregnancy because of physiologic, anatomic and psychological changes in postpartum and there is no significant difference in the two groups.

Therefore offering necessary instructions on sexual health in postpartum can help improve family sexual health since inattentiveness to this subject might result in breakup of the family. Here are some recommendations:

1. Offering necessary information on sexual health in postpartum to breastfeeding and non breastfeeding women.
2. Instructions about the methods of preventing vaginal dryness and using lubricants.
3. Offering proper methods of family support to breastfeeding women so that they can have a successful breastfeeding and also a desirable sexual relationship.

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