Recovery After Stroke: Redefining Sexuality

Part of getting back into a normal routine involves resuming a healthy sex life. The need to love and be loved, and to have the physical and mental release sex provides, is important. But, having sex after stroke can present problems or concerns for you and your partner. Stroke can change your body and how you feel. Both can affect sexuality.

Stroke survivors often report a decrease in sexual desire and how often they have sexual relations. Women report a strong decrease in vaginal lubrication and the ability to have an orgasm. Men often have weak or failed erections and ejaculations.

Communication Is Key

Talking about sex is hard for many people – more so if you are unable to understand or say words or if you have uncontrolable crying or laughing (a common problem after stroke). But it is critical to talk openly and honestly with your partner about your sexual needs, desires and concerns. And give your partner a chance to do the same.

Fear of having another stroke during sex is common. But it is unlikely that a stroke will occur during sexual activity. Again, talk to your partner about this. It may make both of you feel better. Counseling may also help.

Getting Started

- Start by re-introducing familiar activities such as kissing, touching and hugging.
- Create a calm, non-pressure environment where both of you will feel comfortable.

Depression, Medicines, Pain

It is common for stroke survivors and/or their partners to suffer from depression. When you are depressed, you tend to have less interest in sexual intimacy. The good news is that depression can be treated with medicines. The medicines may increase your interest in sexual activity but also may have side effects that interfere with your ability to enjoy sex.
The same can be said for anxiety, high blood pressure, spasticity (stiffness or uncontrolled jerking), sleeping problems and allergies. Problems in these areas can be treated by medicines. But, the medicines may decrease your ability to enjoy sex. If your ability to enjoy sex has decreased since your stroke, talk with your doctor about medicines that have fewer sexual side effects.

After stroke, many survivors have problems with pain. The pain can contribute to loss of sexual desire, impotence and the ability to have an orgasm. Talk to your doctor about ways to manage your pain.

**Incontinence and Impotence**

If you are having trouble with controlling your bladder or bowel, you may be afraid that you will have an accident while making love. One tip is to go to the bathroom – if you can – before having sex.

If you have a catheter (small, flexible tube) placed in your bladder or urethra, you can ask your doctor’s permission to remove it and put it back in afterwards. A woman with a catheter can tape it to one side. A man with a catheter can cover it with a lubricated condom (rubber). Using a lubricant or gel will make sex more comfortable. Other suggestions:

- Don’t drink liquids before sexual activity.
- Place plastic covering on the bed, or use an incontinence pad to help protect the bedding.
- Store cleaning supplies close in case of accidents.
- Avoid positions that put pressure on the bladder.

Impotence refers to problems that interfere with sexual intercourse, such as a lack of sexual desire, being unable to keep an erection, or trouble with ejaculation. Today, there are many options available to men with this problem. For most, the initial treatment is an oral medicine. If this doesn’t work, options include penile injections, penile implants or the use of vacuum devices. Men who are having problems with impotence should check with their doctors about corrective medicines. This is especially true if you have high
blood pressure or are at risk for a heart attack.

**Tips for Enjoying Sex**

- Communicate your feelings honestly and openly.
- If you have trouble talking, use touch to communicate. It is a very intimate way to express thoughts, needs and desires.
- After stroke, your body and appearance may have changed. Take time for you and your partner to get used to these changes.
- Maintain grooming and personal hygiene, to feel attractive not only for yourself but your partner.
- Explore your body for sexual sensations and areas of heightened sensitivity.
- Have intercourse when you are rested and relaxed and have enough time to enjoy each other.
- Try planning for sex in advance, so you can fully enjoy it.
- Be creative, flexible and open to change.
- The side of the body that lacks feeling or that causes you pain needs to be considered. Don’t be afraid to use gentle touch or massage in these areas.
- Use pillows to prop yourself up on one side. You can lie on that side or have your partner take the position on top.
- If you are not able to make thrusting motions, your partner may want to perform that part of intercourse.
- If intercourse is too hard, remember there are other pleasurable forms of lovemaking, including touching and caressing, hugging, massage, oral sex, self touching and using a vibrator.

**If Not in A Relationship**

If you are not in a relationship, you may be able to fulfill your needs and desires through masturbation (the act of self-stimulation). This is a perfectly normal activity. You should not feel shame or guilt about it.

This practice can help you focus on the touch that is most pleasing and comfortable to you. It allows you to go at your own pace to re-
familiarize yourself with your sexual needs. In fact, self-pleasuring can help you relax and become accepting of your feelings. You can focus on yourself and not worry about someone else.

**What Can Help**

- Ask your doctor about changes to expect when having sex and for advice on how to deal with them. Be sure to discuss when it is safe to have sex again.
- Focus on being loving, gentle and caring with each other. Be romantic with soft music and candlelight dinners.
- Speak honestly with your partner about your sexual changes. They’ll be glad you did, and, together, you can often work out the best solution.
- Contact your local stroke association.
- Join a stroke support group. Other survivors will understand, validate your issues, and offer encouragement and ideas.

**Professionals Who Can Help**

- A general physician or doctor.
- A urologist, who specializes in urinary functions as well as the male reproductive system and can help answer questions and provide solutions.
- A gynecologist, who specializes in the female reproductive system and sexual problems.
- A licensed counselor can help you or your partner talk about uncomfortable feelings about sex, the effects of stroke on the relationship/individual, or any other issues.

**More References**

*Resurrecting Sex: Solving Sexual Problems and Revolutionizing Your Relationship* by David
Remember to ask your doctor, “Where am I on my stroke recovery journey?”

Note: This fact sheet is compiled from general, publicly available medical information and should not be considered recommended treatment for any particular individual. Stroke survivors should consult their doctors about any personal medical concerns.

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Rehabilitation is a lifetime commitment and an important part of recovering from a stroke. Through rehabilitation, you relearn basic skills such as talking, eating, dressing and walking. Rehabilitation can also improve your strength, flexibility and endurance. The goal is to regain as much independence as possible.