

Female Sexual Dysfunction After Pelvic Fracture is Common

Alice Walton¹, Omer Raheem¹, Steven Brandes², Cooper R.
Benson¹

¹Department of Urology, Tulane University School of Medicine , New Orleans, LA

²Department of Urology, Columbia University, New York, NY



Results



Fifteen articles were identified for inclusion

- Three articles from urology publications
 - Khunda A et al, Intern Urogyn J and Pelv Floor Dys 2009, Suppl 20:3
 - Wright JL et al, J Urol 2006
 - Black PC et al, J Urol 2005

Majority of the evidence gathered from questionnaires was not specific to female sexual dysfunction

| Domain | Mean (Range) |
|------------------------------------|---------------|
| Sexual Dysfunction | 51% (38%-65%) |
| Dyspareunia | 45% (3%-64%) |
| Orgasmic Dysfunction | 36% (7%-67%) |
| Genitourinary Pain | 35% (17%-72%) |
| Decreased Interest in Intercourse | 20% (4%-45%) |
| Decreased Intercourse Satisfaction | 40% (4—45%) |
| Pelvic Floor Dysfunction | 57% (47%-67%) |



Conclusion

- FSD after traumatic PF is not uncommon, occurs mostly in young women, can be morbid, and have significant impact on quality of life
- FSD after PF is underreported in the urology literature and likely under-represented by the current data
- Prospective studies are needed to better understand prevalence of FSD in trauma survivors
 - Improved understanding of etiology of FSD in context of injury patterns, types of PF treatments
 - Identify risks factors of FSD and effective treatment options