

Sexual pain disorders: dyspareunia and vaginismus

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in: Porst H. Buvat J. (Eds), ISSM (International Society of Sexual Medicine) Standard Committee Book, Standard practice in Sexual Medicine, Blackwell, Oxford, UK, 2006, p. 342-350

Pain is almost never “psychogenic,” except for pain from grieving. Pain has biological basis, when it is the alerting signal of an impending or current tissue damage from which the body should withdraw it is defined as “nociceptive”. When pain becomes a disease per se, i.e. it is generated within the nerves and nervous centers, it is called “neuropathic”. It is a complex perceptive experience, involving psychological and relational meanings, which may become increasingly important with the chronicity of pain.

Sexual pain disorders – dyspareunia and vaginismus – are very sensitive issues, as the pain involves emotionally charged behaviors: sexual intimacy and vaginal intercourse. Most patients have been denied for years that their pain was real and feel enormously relieved when they finally meet a clinician who trusts their symptoms and commits him/herself to a thorough understanding of the complex etiology of their sexual pain.

Talking with patients about sexual pain disorders requires special attention to the sensitivity of the issue and an empathic attitude to the biological “truth” of pain. This is the basis of a very rewarding clinician-patient relationship and is the basis of an effective therapeutic alliance.

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