

Female sexual dysfunction: Treatment

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There is no effective therapy without accurate and comprehensive diagnosis. This is even more true for female sexual dysfunction (FSD), which usually has a multifactorial aetiology. Biological, psychosexual and context-related factors, further characterized as predisposing, precipitating and maintaining, may interact to give the FSD that the woman is complaining about its specific individual characteristics.

The accurate diagnosis of FSD is currently a challenge for researchers and clinicians. The temptation of searching for the aetiology, preliminary to finding the optimal treatment, is usually inappropriate, and continuously frustrated by the complexity of female sexuality. The delay in the medical approach to FSD and the persistent psychological perspective make it difficult to have evidence-based medical treatments of FSD except in the domain of sexual hormones.

From the clinical point of view, an integrated diagnostic and treatment approach is therefore necessary to tailor treatment according to the individual and couple's needs at the best of our current scientific and clinical knowledge.

The available evidence for treatment of FSD will be reviewed. Special focus will be given to the role of the physical therapist in addressing the muscle and pelvic floor-related contributors to FSD.