Hormone–Sex Drive Link Is Weak in Menopause

BY KATE JOHNSON
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NEW ORLEANS — Hormone levels are weakly associated with sexual desire during the menopausal transition, while other sexual desire predictors are more important, according to an analysis of data from the Study of Women's Health Across the Nation.

"This is the first really solid data to nail down the role of hormones in sexual desire," said investigator Dr. John Randolph, professor of obstetrics and gynecology at the University of Michigan, Ann Arbor. But he cautioned that while the study found a significant association between women's sexual desire and their levels of testosterone and follicle-stimulating hormone (FSH), the association was small.

"It's biologically significant but probably not clinically significant—and I'm worried how this information might be misinterpreted," he said at a press conference during the annual meeting of the American Society for Reproductive Medicine. The study found that much stronger predictors of sexual desire were satisfaction with an existing relationship, availability of a partner, and ethnicity.

The multicenter, multiethnic study, funded by the National Institutes of Health, included 3,302 women who were still menstruating at baseline, and followed them with annual serum hormone measurements and sexual desire questionnaires. The aim was to determine the role of hormone levels and their fluctuations over time in changing sexual desire over the menopausal transition. The hormones measured were testosterone, estradiol, FSH, dehydroepiandrosterone (DHEA), sex hormone–binding globulin, and the free hormone indices FEI and FTI.

The data used were from 3,290 women who had at least one and up to six annual serum hormone measurements and sexual desire questionnaires. Testosterone was positively related and FSH was negatively related to sexual desire, Dr. Randolph reported. There was no association observed with estradiol, DHEA, sex hormone–binding globulin, or the free hormone indices FEI and FTI. ■

Low DHEA Level Doubles Sexual Dysfunction Risk

NEW ORLEANS — Postmenopausal women are more than twice as likely to experience sexual dysfunction as are younger women, and their risk also is doubled if they have low levels of dehydroepiandrosterone (DHEA), according to new data from the Penn Ovarian Aging Study.

"Higher levels of DHEA appear to be protective in this population," said Dr. Clarisa R. Gracia, who presented the findings at the annual meeting of the American Society for Reproductive Medicine. "This raises the question about whether supplementation is an option—although there is no evidence to support this at this time," she commented at a press conference during the meeting.

The Penn Ovarian Aging Study, which included more than 400 healthy women aged 35-47 years, aimed to examine the natural progression of ovarian function during the transition to menopause.

Women were followed for 3 years with questionnaires, including the Female Sexual Function Index, and annual measurement of reproductive hormones including follicle-stimulating hormone, luteinizing hormone, sex hormone–binding globulin, total testosterone, and DHEA.

This analysis of the study included 311 women—102 with sexual dysfunction and 209 without. Women with sexual dysfunction were twice as likely to have DHEA levels in the lowest quartile, with an average measurement of 66.5 mcg/dL compared with an average measurement of 81.1 mcg/dL in those without sexual dysfunction. No significant associations were noted between the other measured hormones and sexual dysfunction, according to Dr. Gracia of the University of Pennsylvania in Philadelphia.

Multivariate analysis revealed that high DHEA levels were protective against sexual dysfunction, while factors associated with sexual dysfunction included absence of a sexual partner (OR 11.2), high anxiety (OR 3.8), and children under age of 18 living at home (OR 1.6), she said.

—Kate Johnson

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