



Dyadic Sexuality and Navigating Couples with Sexual Dysfunction Through the Urological Lens

Psychosocial perspective

Rose Hartzell-Cushanick, PhD, EdS, LMFT, CSTS, CSES, IF
(she/her)
San Diego Sexual Medicine

My Disclosures

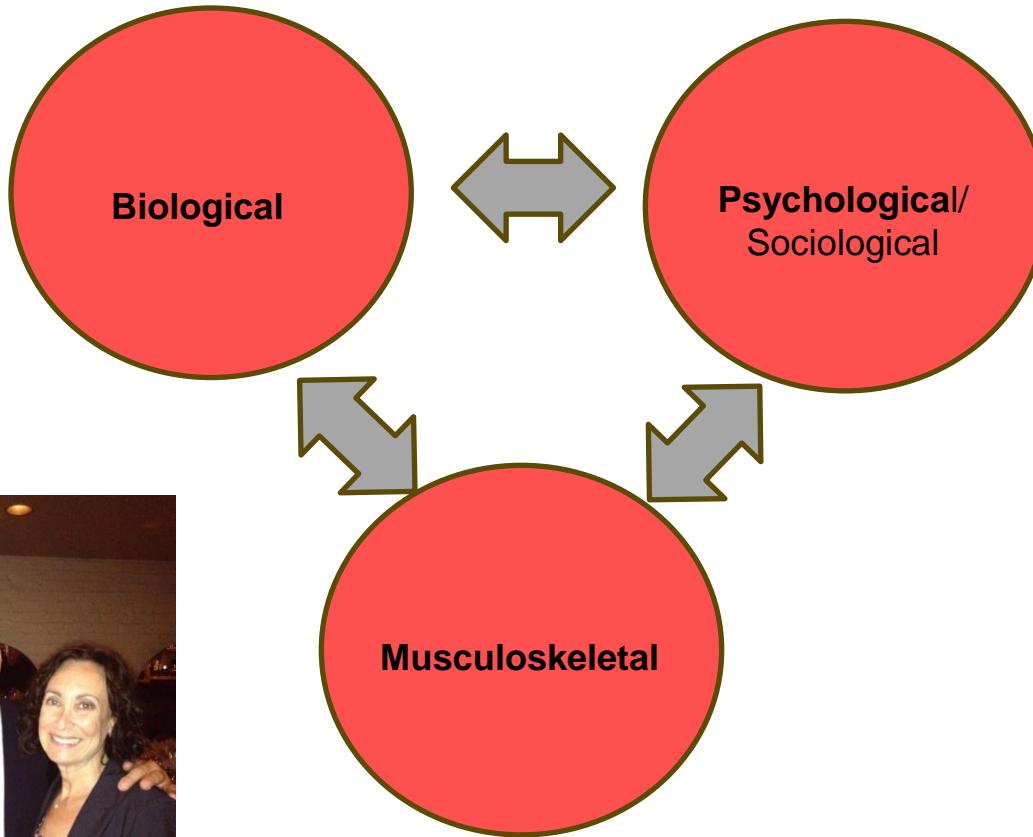
- Daré
- Endo





**THANK YOU FOR THIS
HONOR**

My journey...



We are all part of a larger system...





TREATING A SEXUAL ISSUES DISRUPTS THE CURRENT COUPLE SYSTEM

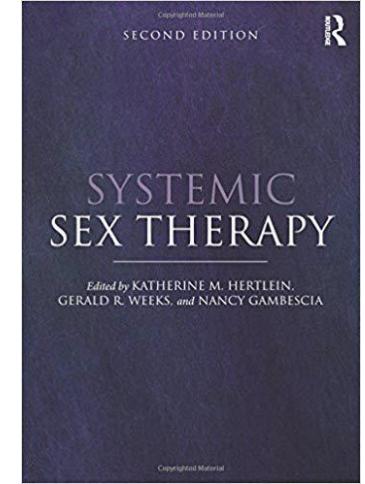
(NOT JUST THE INDIVIDUAL YOU ARE TREATING)

Let me start with a story...

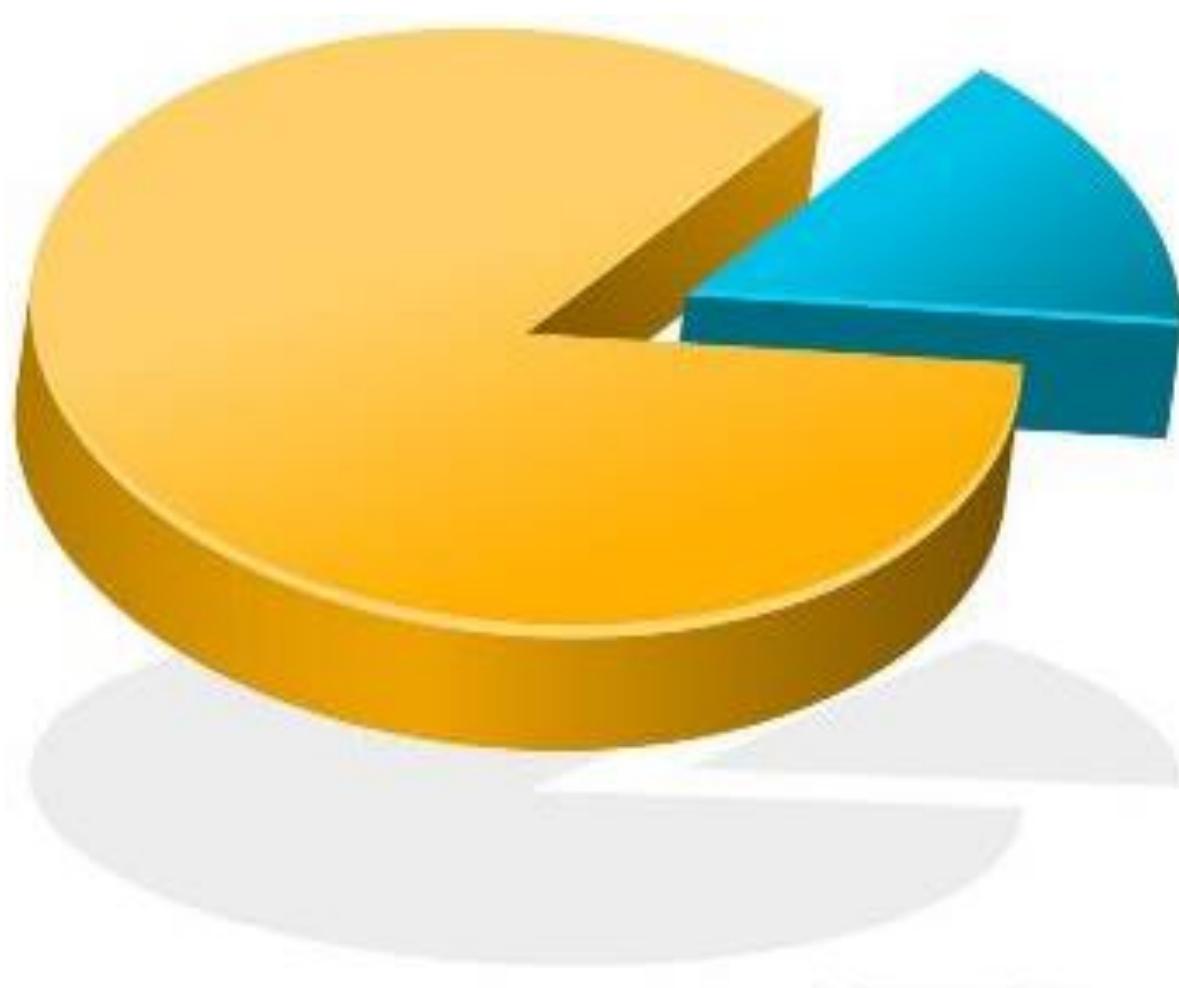


Intersystem Approach

- Individual-biological/medical
- Individual-psychological
- Dyadic relationship or couple dynamics
- Intergenerational influences (patterns, values, attachment style, etc)
- Contextual factors such as society/culture/history/religion/physical environment



Psychosocial dyadic dynamics are one piece of the puzzle



Dyadic Issues Impact on Multiple Levels

- Predisposing factors
 - can make an individual more vulnerable to sexual dysfunctions
- Precipitating factors
 - those that trigger a sexual condition
- Maintaining factors
 - prolong and exacerbate a sexual dysfunction

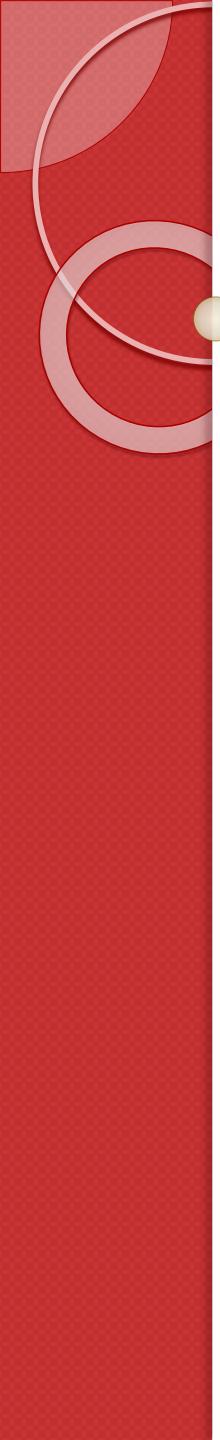
Althof, S., Leiblum, S., Ghevret-Measson, M., Hartmann, U., Levine, S., McCabe, M., Plaut, M., Rodrigues, O., & Wylie, K. (2005). Psychological and interpersonal dimensions of sexual function and dysfunction. *Journal of Sexual Medicine*, 2, 793-800.



**DYSFUNCTION MAY
SERVE A
FUNCTION IN THE
RELATIONSHIP**

(E.G. PARTNER MAY HAVE PAIN OR ILLNESS)

There is a lot to cover,
so I'm
just going to do
an overview



OVERVIEW

The word "OVERVIEW" is written in a bold, sans-serif font, composed of individual letters that are 3D-style blocks. The blocks are arranged diagonally, sloping upwards from left to right. Each letter has a different color: O (purple), V (blue), E (orange), R (green), V (pink), I (light blue), E (dark green), and W (orange). The letters are slightly offset, creating a sense of depth and perspective.

Erectile Difficulties and the Couple

- Treating ED can increase FSFI (*Goldstein, et al., 2005*)
- Partners response to ED (are they contributing)
 - Supportive vs anxiety provoking
- Treatment can also impact dynamics
 - eg implant and GSM



Orgasm and the Couple

- Some women (and men) are unable to communicate their specific desires regarding physical stimulation, intensity, and focus of stimulation (Kelly, et al., 2006; Witting, et al., 2008)
- Partner variables, such as lack of experience, knowledge about sexual stimulation, or indifference to partners arousal can contribute to orgasm difficulties

Genito-Pelvic Pain and the Couple

- Partner perception of, and reactions to genito-pelvic pain are repeatedly associated with pain intensity in women, as well as well-being and sexual function in both partners (Pukall et al., 2016; Rosen & Bergeron, 2018)
- Depend on if the partner is highly solicitous, negative, or facilitative

Solicitous partners

- Halt all sexual activity at the first hint of a woman's discomfort
- Reinforce avoidance
- Prevent experimentation that
 - discomfort may be tolerable or
 - able to be overpowered by increasing arousal

Negative Partners (hostile, angry)

- Can contribute to
 - increased pain
 - decrements in sexual function
 - diminished sexual and relationship satisfaction

(Bergeron, Corsini-Munt,Aerts, Rancourt & Rosen, 2015)

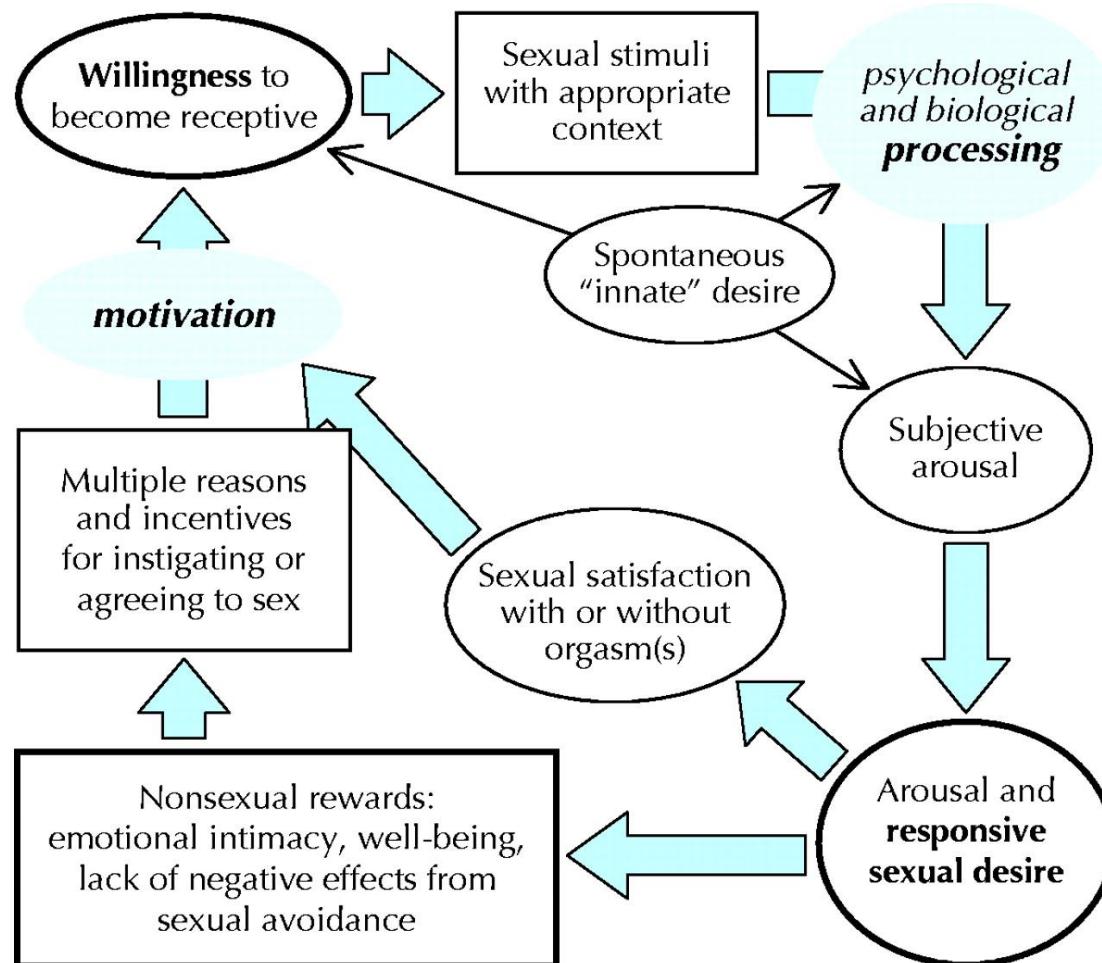
Facilitative partners

- Characterized by encouraging the woman and positively reinforcing her attempts to have sex are associated w/ lower pain reports and greater well-being and sexual function in both the woman and her **partner** (Rosen, Bergeron, Sadikaj, & Delisle, 2015)

Desire and the Couple

- What is ‘low’ desire or OCSB?
- Is it desire discrepancy?
- Adherence to a rigid sexual scripts (Sanchez, 2005)
 - Sexual monotony (Cavalho & Nabre, 2011)
- Male HSDD can be secondary to sexual dysfunction in his partner (e.g. knowing their partner is not interested in sex) (Murray, Milhausen, Graham & Kuczynski, 2017)

Fig. 1: Sex response cycle, showing responsive desire experienced during the sexual experience as well as variable initial (spontaneous) desire.



Desire and the Couple

- Two motivations for having sex
 - Approaching a positive goal (relationship satisfaction, physical pleasure)
 - Avoiding a negative outcome (partner disappointment or relational conflict) (Muise, Bourdreau, & Rosen, 2017)
- Relational dynamics and other contextual factors strongly influence sexual desire in women (Mark, Herbenick, Fortenberry, Sanders, & Reece, 2014)

Peyronie's Disease and the Couple

Sexual Medicine
Open Access



Psychosexual Symptoms and Treatment of Peyronie's Disease Within a Collaborative Care Model

Rose Hartzell, PhD, EdS, CHES, LMFT

San Diego Sexual Medicine, San Diego, CA, USA

DOI: 10.1002/sm2.45

ABSTRACT

Introduction. Peyronie's disease (PD) can be emotionally and sexually debilitating for patients and may negatively impact partner relationships.

Aims. This study aims to present an ongoing collaborative care model for patients with PD and to discuss the critical need for integration of patient care among sexual medicine physicians and mental health practitioners or sex therapists.

Methods. PubMed searches using the terms "Peyronie's disease" and "natural history," "treatment," "psychosexual," "depression," "relationship," and "partner" were conducted. Expert opinion based on review of the relevant published literature and clinical experience was used to identify meaningful treatment targets for patients with PD within a collaborative care model.

Main Outcome Measure. Characteristics of PD, medical treatment, and important assessment and treatment targets, including physical, emotional, psychosexual, and relationship concerns, from peer-reviewed published literature and clinical experience.

Results. PD can result in significant patient and partner distress and relationship disruption. Sex therapy interventions

Table 3 Call out box highlighting important components of Peyronie's disease (PD)-associated patient and partner relationship concerns that may be appropriate targets for treatment

PD-associated relationship treatment targets

Concern about not sexually satisfying partner

Concern about hurting partner during sex

Conflicting or unbalanced sexual desires

Lack of emotional support or withdrawal of the partner

Loss of intimacy

Boredom with limited sexual positions due to penile curvature

Partner feelings of helplessness

Partner feelings of personal responsibility

Partner frustration with patient's fixation on altered penile shape

Partner sexual dysfunction



HOW DO YOU SUPPORT COUPLES NAVIGATING SEXUAL HEALTH CHALLENGES?

Creating Your Village

- Sexual Therapists

- <https://www.aasect.org/referral-directory>
- <https://sstarnet.org/find-therapist>

Or

- <https://app.v1.statusplus.net/membership/provider/index?society=isswsh>



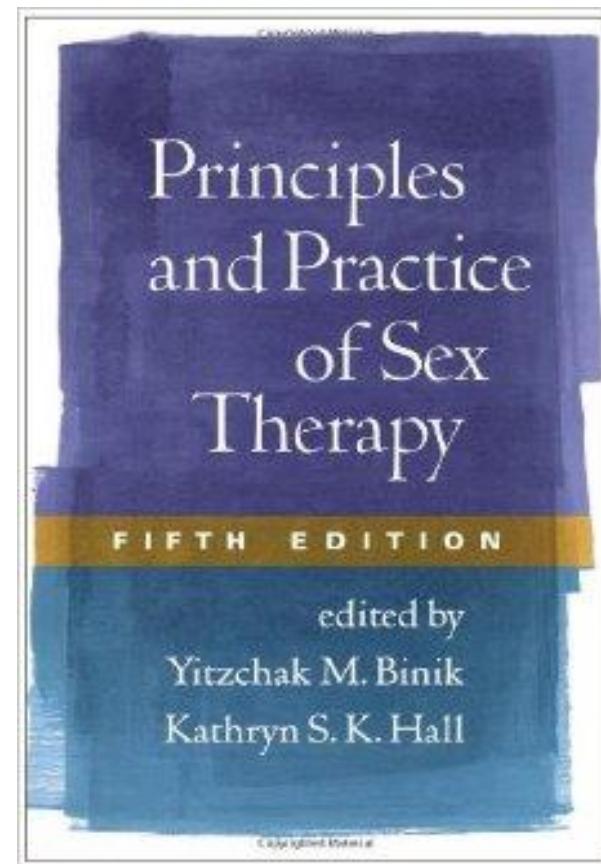
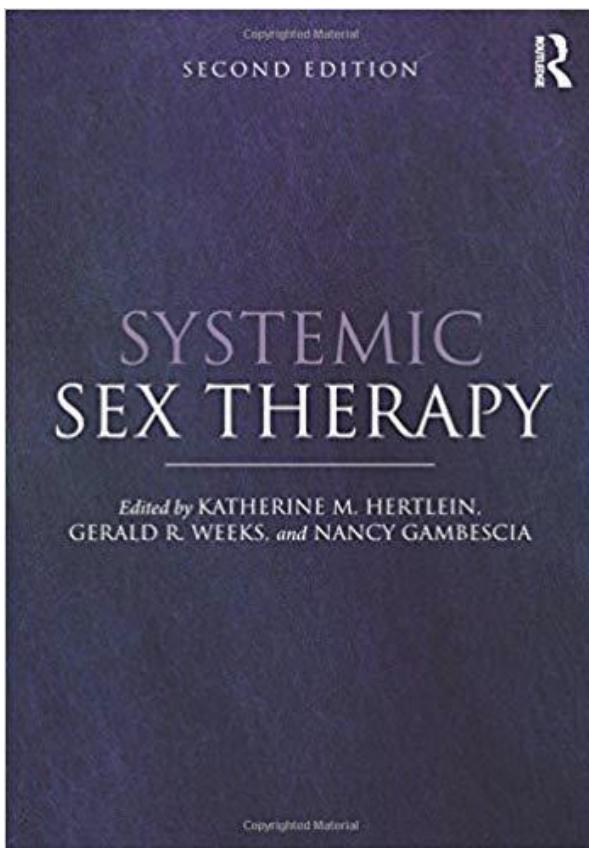
REFERRALS





TREATMENT APPROACHES FROM A PSYCHOSOCIAL PERSPECTIVE FOR SEXUAL DYSFUNCTION IN COUPLES

Book Recommendations



Sex therapists can help couples

- Address any **psychological components**
 - E.g. stress, marital problems, affairs, etc
- Address how sexual issue has **impacted the partner(s) relationship** (healing any relationship discord).
- Discuss any **concerns regarding biological treatment** choice among all partners
- Incorporate **biological treatment into the partner(s) new “sexual script.”**

More treatment suggestions

- Sensate focus
- Erotica
- Relationship Skills
- Dual Control Model
- Sexual Script



More treatment suggestions

- Personalized homework assignments
- Expanding the sexual repertoire
- Sexual and nonsexual communication
- Sexual techniques (touch and orgasm)



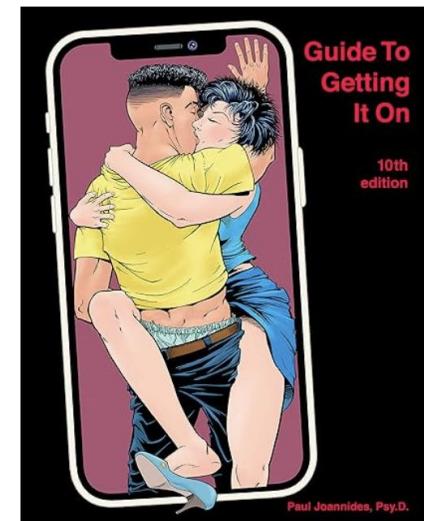
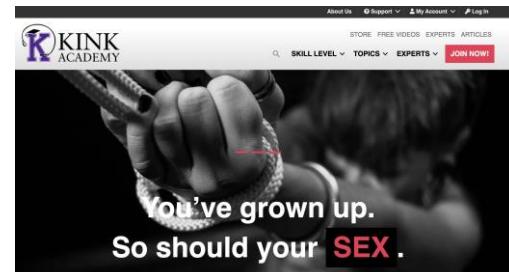
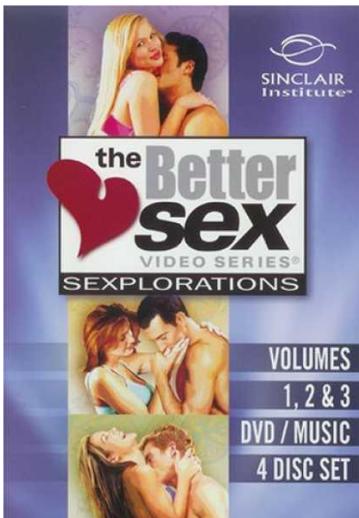
Sensate Focus

- Take a shower and bath together (watch your partner)
- Arrange bedroom environment (e.g. candles, music, etc.)
- Take turns being giver and receiver exploring each other's bodies and giving feedback
- Temperature, texture, pressure

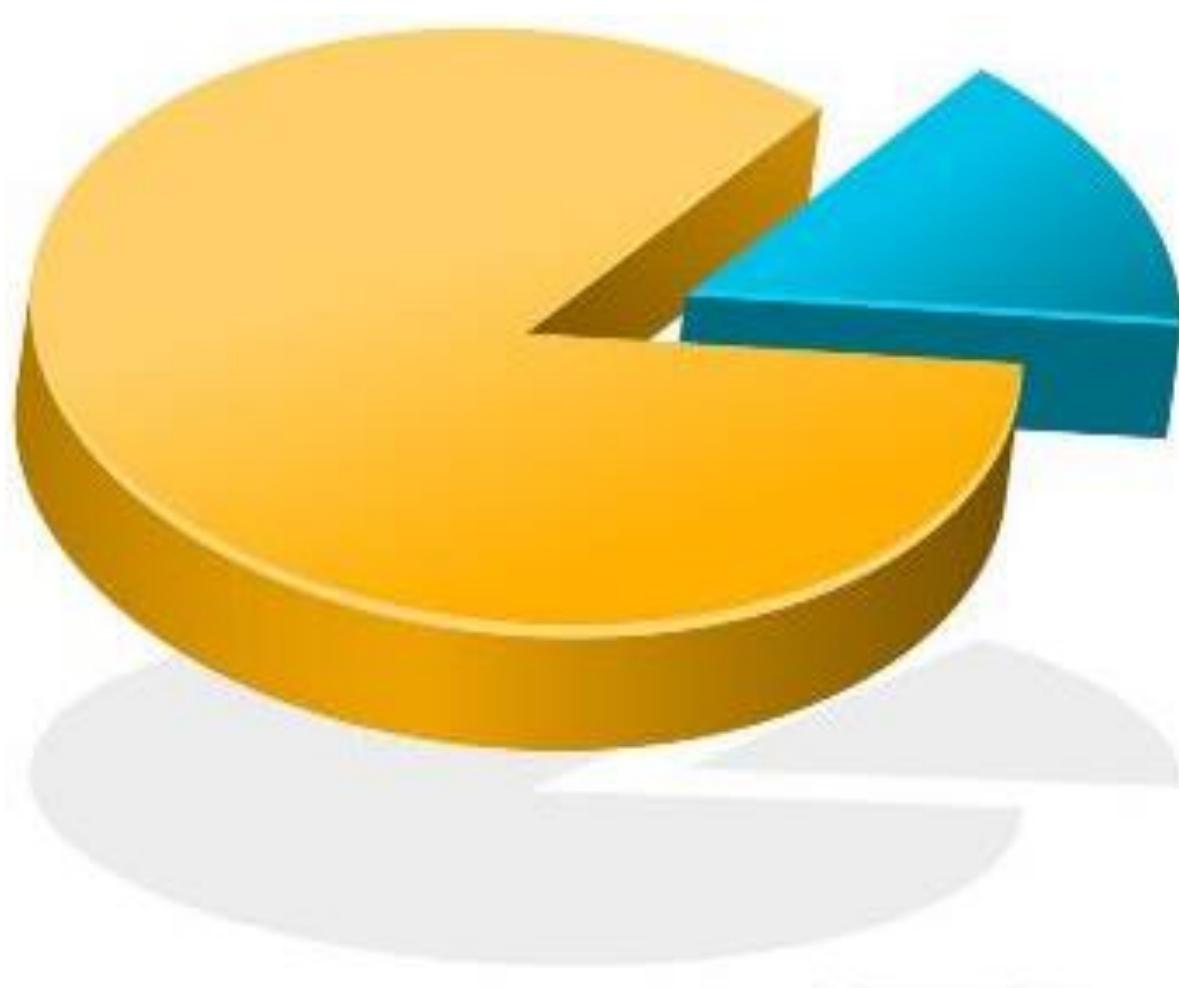


Erotica & Education for Couples

- [SexSmartFilms](#)
- Sinclair Institute Videos (Better Sex Series)
- [Kink Academy](#)
- OMGYES
- Guide to Getting it On



Psychosocial dyadic dynamics are one piece of the puzzle





**WORKING FROM
MULTIDISCIPLINARY
APPROACH MAXIMIZES
THE BENEFITS OF EACH
THERAPY TO THE
COUPLE**

THANK YOU!



DR. ROSE HARTZELL-CUSHANICK

RHARTZELL@SDSM.INFO

References

- Althof, S., Leiblum., Ghevret-Measson, M., Hartmann, U., Levine, S., McCabe, M., Plaut, M., Rodrigues, O., & Wylie, K. (2005). Psychological and interpersonal dimensions of sexual function and dysfunction. *Journal of Sexual Medicine*, 2, 793-800.
- Bergeron, S., Corsini-Munt, S., Aerts, L., Rancourt, K., & Rosen, N.O. (2015). Female sexual pain disorders: a review of the literature on etiology and treatment. *Current Sexual Health Reports*, 7(3), 159-169.
- Binik, Y. & Hall, K. (2014). *Principles and Practices of Sex Therapy* (5th ed.). New York, NY: The Guilford Press.
- Carvalho, J., & Nobre, P. (2011). Biopsychosocial determinants of men's sexual desire: Testing an integrative model. *Journal of Sexual Medicine*, 8(3), 754-763.
- Goldstien, I Fisher, WA, Sand M, Rose RC, Mollen M Brock G, Karlin G, Pommerville P, Bangeter K, Bendel T-J, and Derogatis LR for the Vardenafil Study Group, Women's sexual function improved when partner are administered vardenafil for erectile dysfunction: a prospective randomized double-blind, placebo-controlled trial, *Journal of Sexual Medicine*, 2, 819-832.
- Hartzell R. Psychosexual symptoms and treatment of Peyronie's disease within a collaborative care model. *Sex Med* 2014;2:168–177.
- Hertlein, K., Weeks, G., & Gambescia, N. (2015). *Systemic Sex Therapy* (2nd ed.). New York, NY: Routledge.

References

- Kelly, M., P., Strassberg., D.S., & Turner, C.M. (2006). Behavioral assessment of couple's communication in female orgasmic disorder. *Journal of Sex and Marital Therapy*, 32, 81-95.
- Murray, S.H., Milhausen, R. R., Graham, C.A., & Kuczynski, L. (2017). A qualitative exploration of factors that affect sexual desire among men aged 30 to 65 in long-term relationships. *The Journal of Sex Research*, 54(3), 319-330.
- Rosen, N.O., Bergeron, S., Sadikaj, G, & Delisle, I. (2015). Daily associations among male partner responses, pain during intercourse, and anxiety in women with vulvodynia and their partners. *The Journal of Pain*, 16 (12), 1312-1320.
- Rowland, D. L., & Kolba, T. N. (2018). The burden of sexual problems: Perceived effects on men's and women's sexual partners. *The Journal of Sex Research*, 55 (2), 226-235
- Sanchez, D.T. Crocker, J., & Boike, K.R. (2005) Doing gender in the bedroom: How investment in gender norms affects the sexual experience. *Personality and Social Psychology Bulletin*, 31, 1445-1455.
- Weeks, G., and Gambescia, N. (2015). *Systemic sex therapy* (2nd ed.). New York, NY: Routledge.
- Weiner, L. & Avery-Clark, C. (2017). *Sensate Focus in Sex Therapy: The Illustrated Manual*. New York, NY: Routledge Publishers.
- Witting, K., Sanittla, P., Varjonen, M., Jern, P., Johansson, A., Von Der Pahlen, B., & Sandnabba, K., (2008). Female sexual dysfunction, sexual distress, and compatibility with partner. *Journal of sexual Medicine*, 5(11), 2587-2599.



QUESTIONS?????