

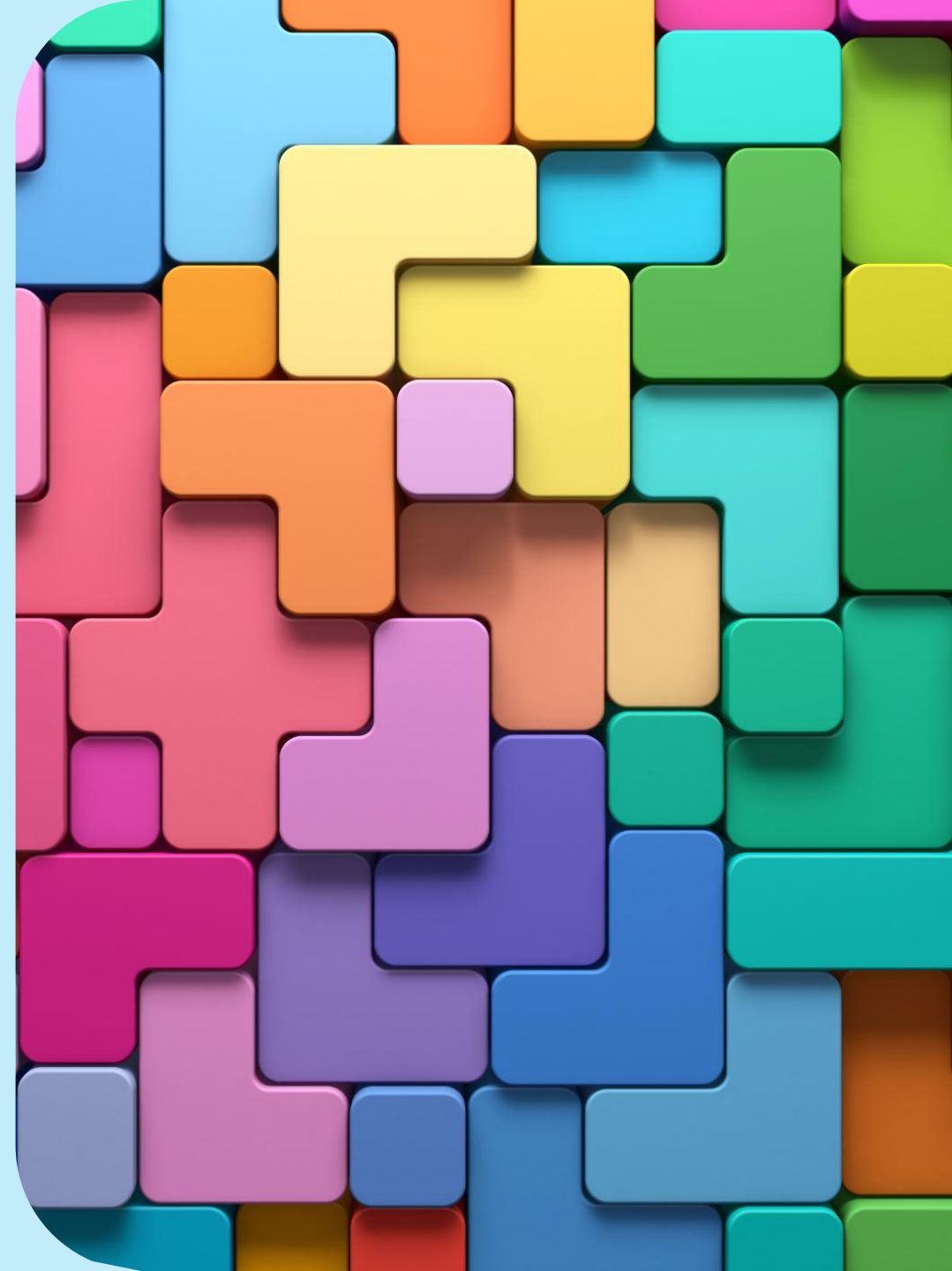
The History of Sexual Medicine, Where We Were, Where We Are, Where We Are Going:

THE PAST

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Disclosures

- No relevant disclosures

Sexual Medicine – The Past

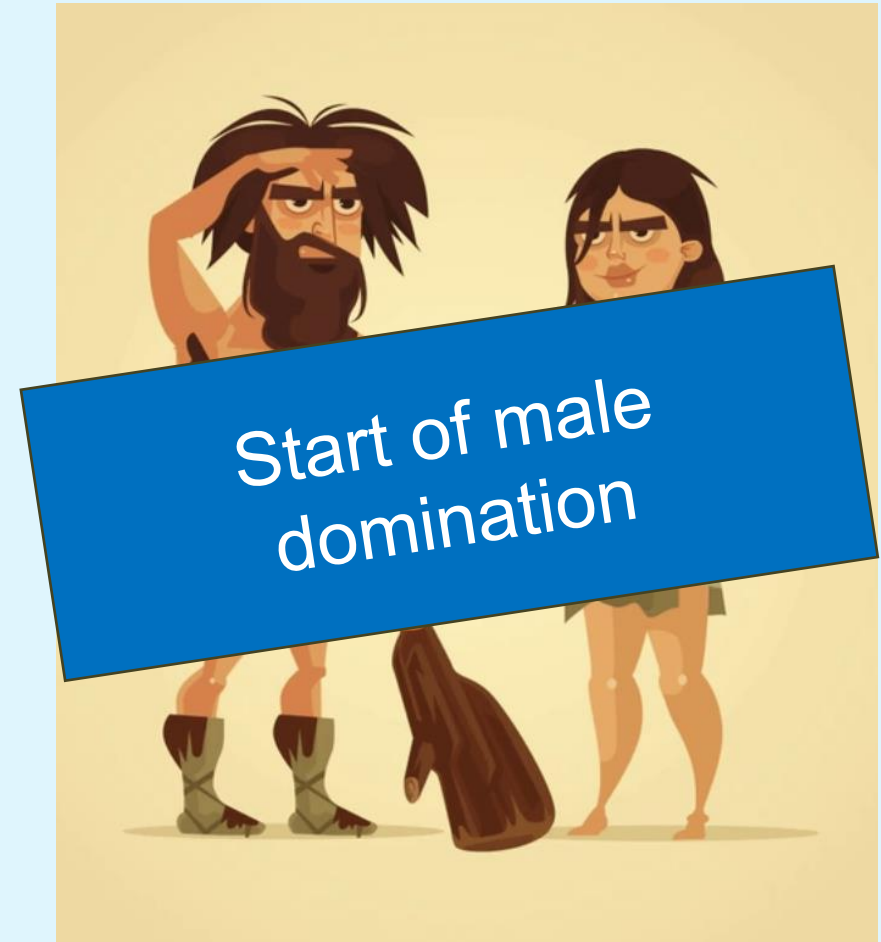
- Historical perspective of sex and women's role
- Changes in how we speak about sexual function
- Development of sexual medicine as a science

Sex in Antiquity

Prehistoric times men and women probably equal in status

Prehistoric family centered around the woman

In the neolithic revolution (starting 10,000 B.C.) lifestyle changed: men went from hunting/gathering to agriculture/settlement



Sex in Antiquity

Led to use of dildo

In ancient Greece men ruled, women were subordinate, had no rights

- Women were married ages 12 - 14
- Only allowed sex with their husbands, expected to do so at least three times a month

Women considered irrational, over-sexed, morally defective: lonely lives

Men could have sex outside of marriage with prostitutes or other men

Greek women waited for husbands to want sex, or masturbated



Roman History

From 750 BC to 450 AD Romans dominated the world: women considered a possession

Roman women had a submissive role in the sexual relationship

- do the work, give him pleasure
- Purpose of marital sex for woman was reproduction

Men expected to be sexually active: homosexuality, prostitution, extramarital sex acceptable

Many taboos: stroking wife, seeing her naked



Sex in the East

Taoism (500 BC) advised as much sex as possible for men: more female partners for intercourse, greater benefit derived

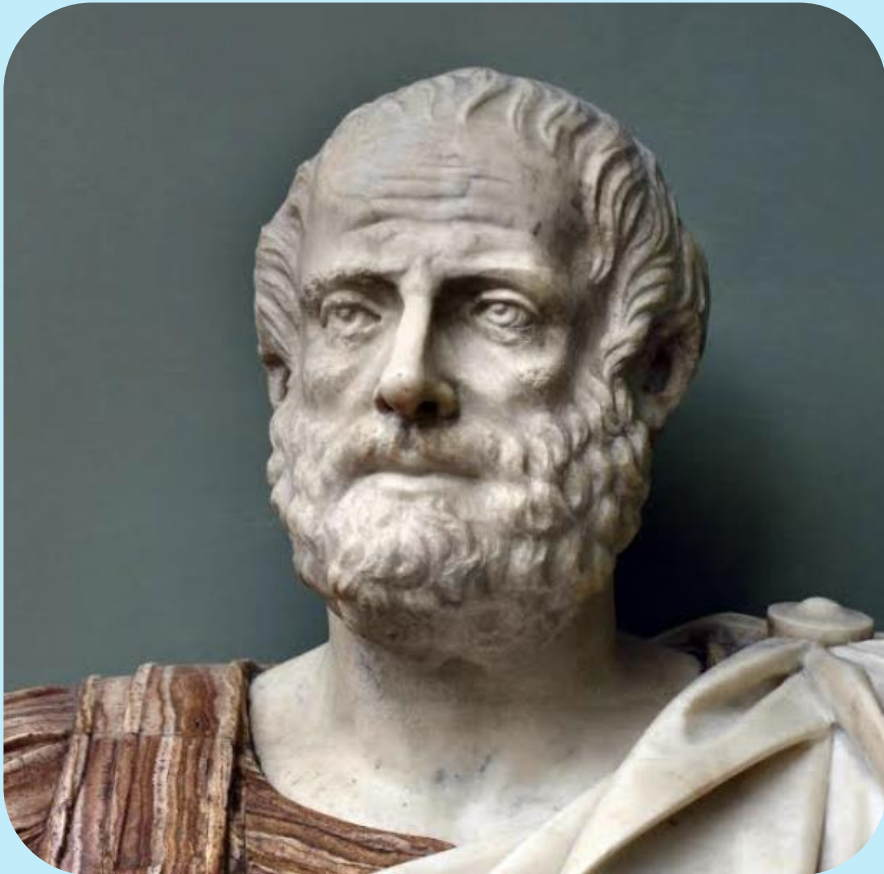
Intercourse: interaction between woman's vaginal moisture (yin) and ejaculate (yang)

Loss of semen concerning; cunnilingus/female masturbation approved because they stimulated yin

Wives in China were mothers and housekeepers



Pleasure



Greek philosopher Aristotle (348-322 BC) wrote:
“The pleasure that comes with coitus” is due to the fact that not only seed is emitted, but also air
Sexual pleasure is not only for men: *'Some people think' that a woman produces semen during coitus, because sometimes she experiences just as much pleasure as a man and at the same time secretes moisture.' Between her pleasure and a pregnancy there is no connection: it happens that a woman does not become pregnant 'even if her pleasure is not less' than that of a man and man and woman with equal pace.”*

Kamasutra “Treatise in Pleasure”



2nd century BC sex manuals written to educate Chinese people in achieving harmony; > 20 chapters given to bride before wedding

Indian women: more freedom in society than Western/Chinese women

Kamasutra, written 3rd – 5th century AD

- gave tips and tricks
- described myriad of sexual positions

After marriage (usually age 12) groom required to treat bride carefully

Christianity

Sex wasn't meant to be pleasurable according to the Catholic Church

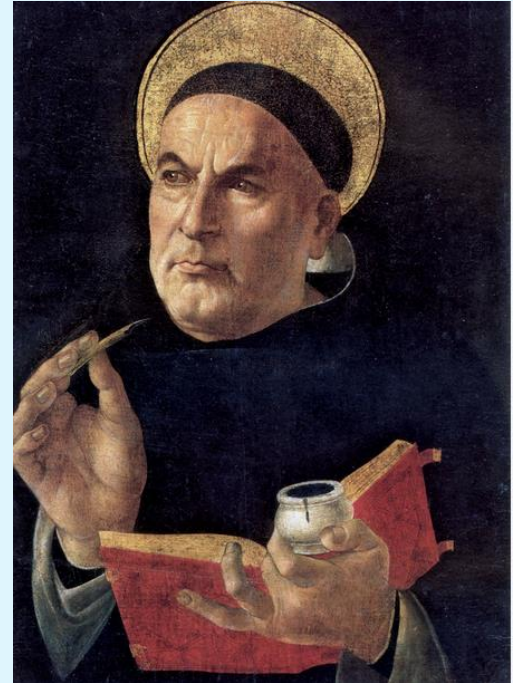
Sex voluntary: limited to relationship between man & woman in marriage

Women had to be obedient and submissive

Augustine wrote *“sexual appetite is a true sin and a serious hindrance to a virtuous life”*

An erection was sinful, but erections could occur spontaneously so women had to behave in a way that men would not be sexually aroused

Thomas Aquinas (1225-1274) wrote in 1265: *“any form of sex not intended for procreation is sinful and a crime against nature also within marriage.”*

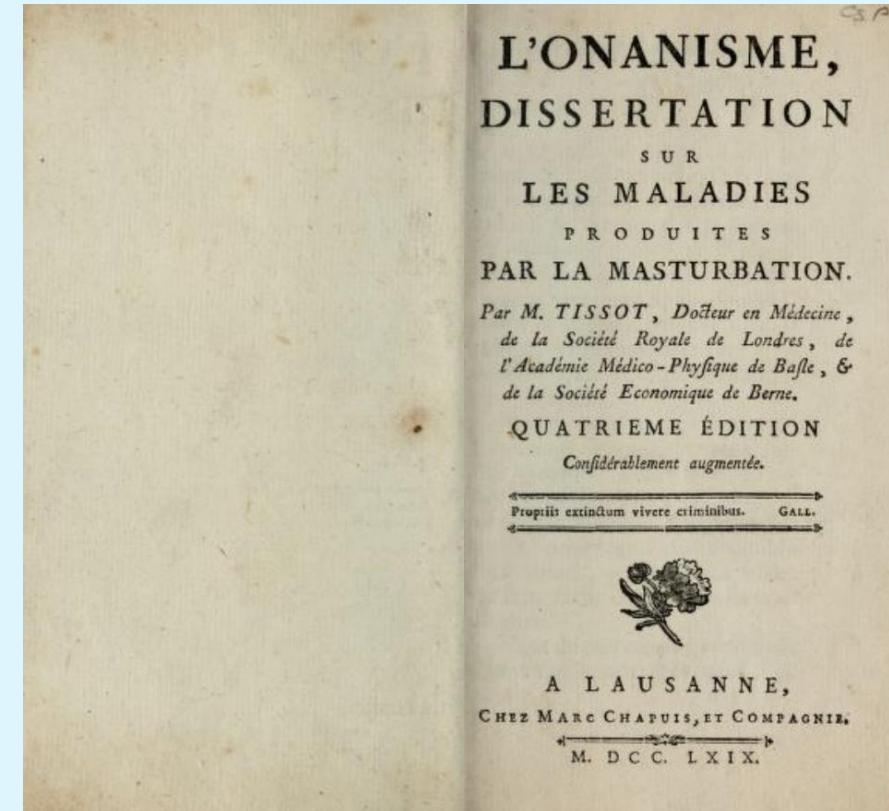


Masturbation a Disease

1716 *The Heinous Sin of Self-Pollution* published in London
Warned against consequences of masturbation, a "heinous sin"

Traité de l'Onanisme: Dissertation sur les Maladies produites par la Masturbation

Tissot regarded masturbation as a mental illness from which one could hardly be cured--a crime worse than suicide--recommended severing the nerves of the glans

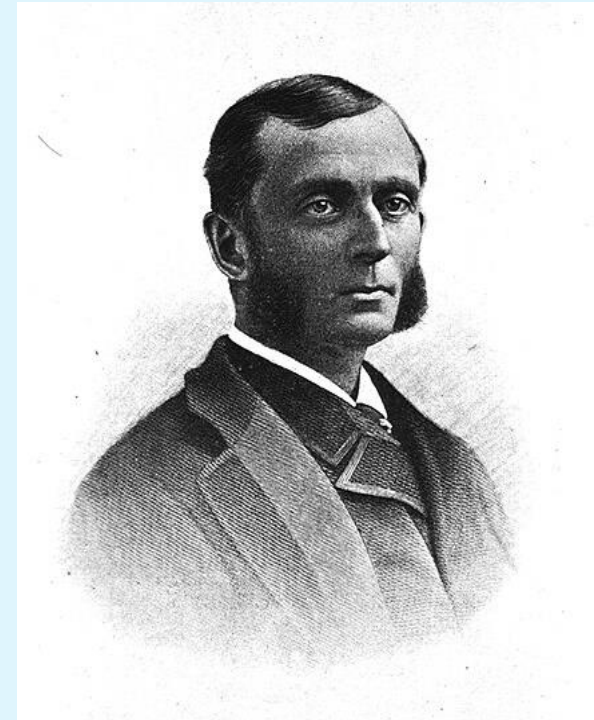


Neurasthenia

In 1869 *The Science of a New Life* claimed girls who masturbated would grow small breasts, a sign of unhealthy development—the only natural sexual behavior was heterosexual coitus in marriage

American neurologist Beard introduced neurasthenia caused by unnatural sex (any sexual practice not for reproduction). Symptoms:

- fatigue after physical or mental exertion
- concentration problems
- muscle cramps
- Inability to relax



Masturbation Treatment

In 19th century circumcision could prevent masturbation; treat alcoholism, syphilis, epilepsy, inguinal hernia, and asthma

Vasectomy could “cure” masturbation

Women must be chaste; men's sexual excesses tolerated if performed in secret

Too much sexual activity could lead to loss of involuntary semen and therefore impotence

Sexual Pleasure

British gynecologist Action claimed *“The majority of women, luckily for them, do not suffer much from sexual feelings of any kind. So they can easily do without sex”*

Women felt pain or nothing at all during coitus, definitely not pleasure

For people older than 50, sexual pleasure considered too exhausting, cause of paralysis

Diagnosis of Hysteria

- Unexplained pain
- Depression
- Tantrums
- Loss of self-control
- Stubbornness
- Sexual desire

Caused by

- Poor diet

and brain

25% of women had hysteria

Treatment pelvic floor massage to hysterical paroxysm (orgasm) but not by masturbation



Charcot's Hammer (1880)

In 1867 the disease "hysteria" was abolished

In 1867 the disease "hysteria" was abolished

Science of Sexual Medicine– 19th Century

Mantegazza (1831-1910), a physician/surgeon, physiologist and anthropologist in Padua, Italy

He transplanted gonads in frogs, measured blood flow and temperature increases during penile erection, investigated the effects of cocaine, including on himself, determining the effects of the drug on cognition were positive

He wrote about puberty, masturbation, aphrodisiacs, erectile and ejaculatory problems, sexual deviations, infertility, and contraception:

- The Sexual Relations of Mankind (1885)
- Physiology of Women 1893)
- Physiology of Love (1896)

Sex

English word “sex” derived from the Latin “sexus” meaning division

Used in the sense of *either of the two groups that people, animals, and plants are divided into according to their function of producing young or the state of being male or female*

In the 19th century scientists started using “sex” to focus on human reproduction

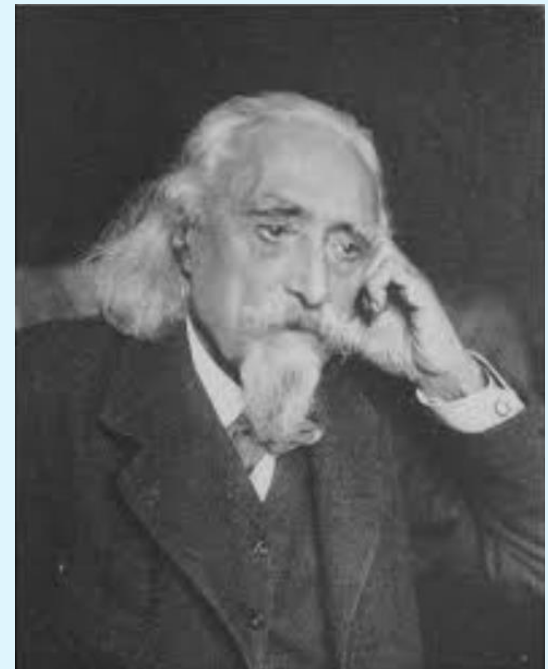
Sexual Medicine Language

Mantegazza founded science of embrace – used “amore” instead of “sexuality” because at that time the word was “sex”

Considered male-female interaction from a physiological, anthropological, philosophical, and social-hygienical point of view

Women active counterparts of men

- potency of female sexuality higher than man
- women were less intelligent than men



Sexology

“Sexology” first used in 1867 in book *Sexology as the Philosophy of Life: Implying Social Organization and Government* by Elizabeth Willard in 1867

- about male female interaction with religious and feministic influences
- not about sex

End of 19th century mainly German and Austrian scientists started using the words sex or sexual in the way we currently use them

Scientific Research of Sex

German psychiatrist/researcher Krafft-Ebing described sexual deviation *Psychopathia Sexualis Eine Clinical-Forensic Study*, 1886: norm was heterosexual coitus (preferably in marriage)

Deviation considered disease to be treated

- Paradoxia sexualis: sexual pleasure at 'wrong' time of life (elderly or children)
- Anesthesia sexualis: insufficient desire
- Hyperaesthesia sexualis: excessive desire
- Paraesthesia sexualis: sexual desire with wrong purpose or object (homosexuality, sadism, masochism, fetishism)

The moral stigma of "sin" was replaced by the stigma of medical diagnosis

Sexualwissenschaft

German dermatologist/psychiatrist Iwan Bloch published *Das Sexualleben unserer Zeit* in 1906

Introduced Sexualwissenschaft as a science: methods to study sexual behavior

Freud, Hirschfeld, Vanselow had used term before, not as a description for a scientific field

Magnus Hirschfeld

Hirschfeld (medicine, philosophy, mathematics) edited and initially published Zeitschrift für Sexualwissenschaft (Journal for Sexual Science) in 1908

Researched sexual abnormalities, in particular the causes of homosexuality

Editor-in-chief of Jahrbucher für Sexual Zwischenstufen, published 1899 - 1923

- homosexuality
- androgyny
- transsexuality

Fought for radical sexual reform
and social rights for homosexuals

Sigmund Freud

In 1912 Freud published "*Über die allgemeinste Erniedrigung des Liebeslebens*" explaining erectile dysfunction was psychogenic

Introduced term Impotenz (impotence), refusal of the penis to perform sexual acts as a result of mental issues - dominated thinking for almost a century

Austrian physician Wilhelm Stekel, Freud's student, claimed 90% of erectile dysfunction had mental origins—therefore management/potential cure limited to mental health treatments

Freud's Theories

Freud's theories were enthusiastically received in the medical community

Purpose of sex was heterosexual coitus, although homosexuality not a disease

Orgasm provided temporary relief of sexual tension, stopped sexual drive for a period of time, at least for men

In contrast, feminine lust was forbidden, perpetuated by the myth:

- men always want to have sex
- women interested in sex considered “sluts”/not normal

Vaginal orgasm seen as “the way it should be”- if a woman could not orgasm through penetration there was something wrong with her

Freud also believed that women had penis envy

Institut für Sexualwissenschaften

Founded in 1919 Hirschfeld, dermatologist Friedrich Wertheim, neurologist Arthur Kronfeld

Institute for public information, scientific research, treatment of sexual disorders

Research performed by Felix Abraham and Ludwig Levy-Lenz regarding the surgical treatment of transsexuals

Advancement of the Science

Bernhard Schapiro, a dermatologist and urologist, developed with Hirschfeld pharmaceutical products

- "Testifortan" to treat impotence
- "Preajaculin" to treat of hypersexuality

Schapiro was the first to treat undescended testis hormonally

Biologic
treatments

Sexual Medicine Support

World League for Sexual Reform held in 5 congresses in various European cities 1921 - 1932

Conferences focused on:

- social reform, sexual education
- birth control
- rational approach to problems such as prostitution, sexually transmitted diseases
- equal rights for homosexual people

Spoils of War

Institut für Sexualwissenschaften was looted and destroyed by the Nazis



Post World War II: Field of sexual health moved from Europe to United States

Alfred Kinsey

Kinsey formed research team with student assistant Clyde M. Tamm, medical psychologist Wardell Pomeroy, and anthropologist Alfred C. Kinsey.

Founded the Institute for Sex Research, an organization to study human sexual behavior.

In 1948, the results of his research were published in *Sexual Behavior in the Human Male*, followed in 1953 by *Sexual Behavior in the Human Female*.

Kinsey: "We must conclude that the current concepts of normal and abnormal human sexual behavior mainly represent moral views. They have little or no biological justification."

Masters and Johnson – 1950's

In 1950s, sex still considered taboo

Initial research completed in 1954, performed in brothels

Discovered during interviews with prostitutes that women sometime faked orgasm--realized he didn't understand how women dealt with sex

Volunteers willing to “go against the prevailing sexual morality” had sex with an unknown masked partner or masturbated in the laboratory, with devices attached to measure their physical responses during sexual activity

Masters and Johnson – 1960's

1966 they described the four phases of the sexual response cycle:

- arousal in which sexual tension increases
- followed by a stable, plateau phase
- transitions into orgasm phase
- followed by recovery/relaxation phase

Helen Singer Kaplan later added desire as a phase

Masters and Johnson proponents of psychologic etiologies of erectile dysfunction (impotence) except post-prostatectomy and premature ejaculation

Sexual Revolution

During the 1960s attitudes toward sex changed

People paid attention to sex--no longer a problem to talk about it--
people discussed sex openly

Introduction of oral contraceptives (1960) “the pill” decreased risk
of unwanted pregnancy

Sex and procreation could now be separated--women could have
a more equal role with men in relationships



Sexual Medicine introduced 1970's



German sexologist, physician, sociologist Volker Sigush introduced the term in his book *Ergebnisse zur Sexualmedizin* describing the development of this new academic speciality

1972 German journal Sexualmedizin issued for the first time, followed by British Journal of Sexual Medicine one year later

1978 American urologist Adrian Zorngiotti, interested in new developments in sexual medicine, organised the first symposium on corpus cavernosum revascularization and invited the two main researchers:

- Vaclav Michal, vascular surgeon (Prague) performed 1st penile revascularization for ED
- Gorm Wagner, sexologist (Copenhagen) researched female sexual dysfunction



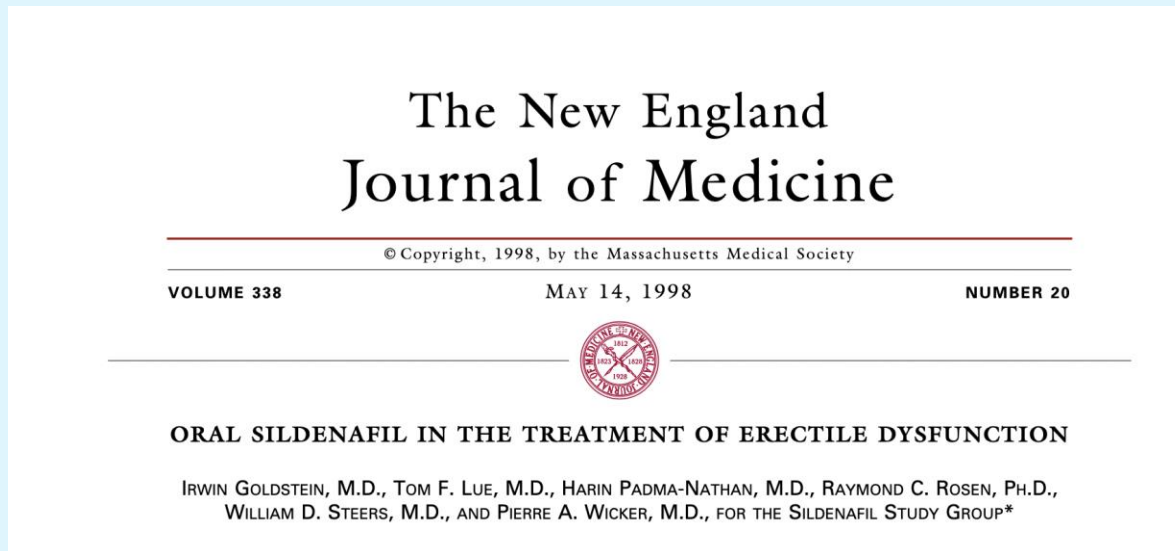
Sexual Medicine Societies

Zorgniotti's meeting became International Society for Impotence Research (ISIR), now International Society for Sexual Medicine (ISSM) in recognition of sexual health problems being more than just impotence and occurring in more than one gender

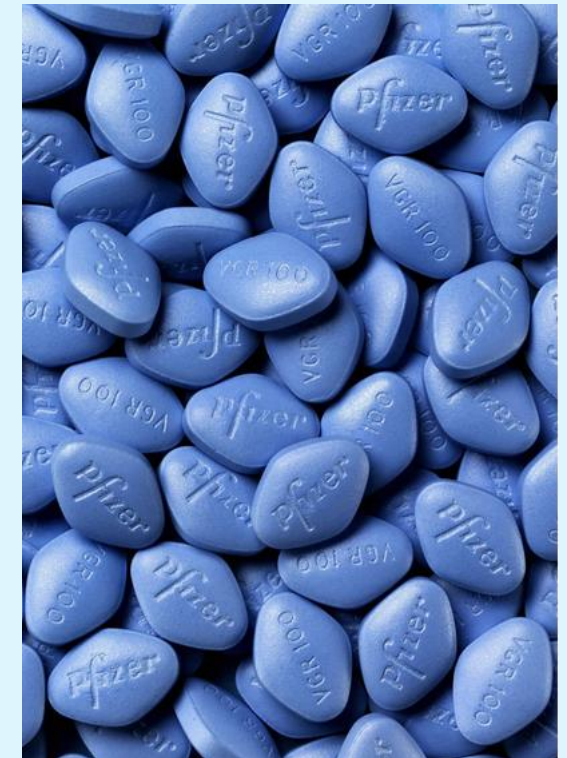
At the World Meeting of ISIR in 1988, Bill Masters gave the opening speech and admitted that he was wrong, that impotence was primarily biologic, not psychologic

1990's regional affiliates formed

Sildenafil Approved USA 1998

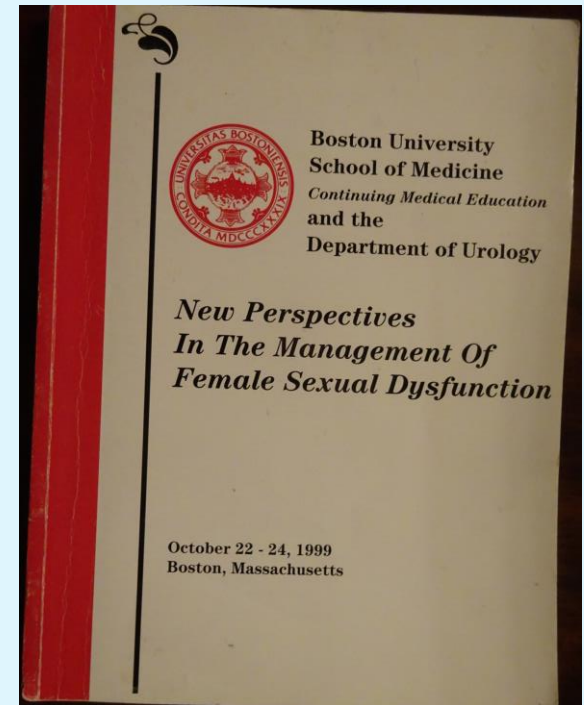


Women began demanding medical treatment for their sexual concerns



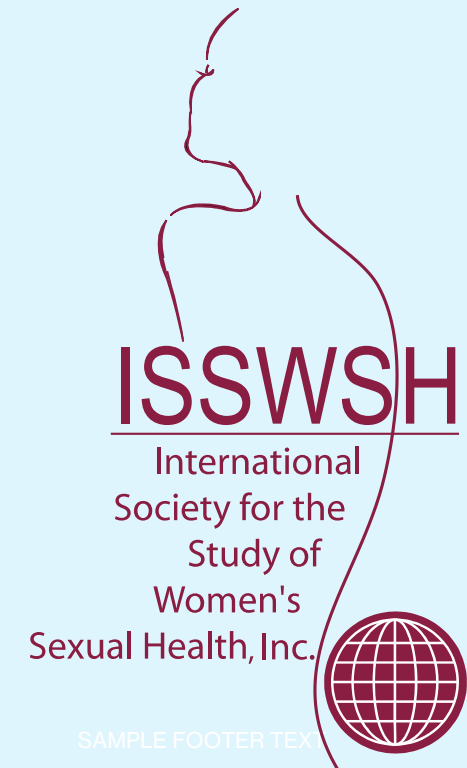
Women's Sexual Health

- 1997 New Perspectives in the Management of Women's Sexual Function Sexual Health
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ISSWSH

- 1999 New Perspectives in the Management of Women's Sexual Function Sexual Health voted to form Female Sexual Function Forum
- 2000 renamed FSFF to International Society for the Study of Women's Sexual Health



ISSWSH

Nomenclature:

- Vulvodynia
- GSM
- HSDD
- FGAD/FCAD
- PGAD

White Papers:

- HSDD
- Role of Androgens in GU tissue and function
- Role of Androgens in GSM

Process of Care:

- Identification of Sexual Health Concerns
- HSDD
- Testosterone for HSDD
- PGAD

Thank you

Rob Schipper



ISSWSH