

Painful sex may not be sexual dysfunction, Montreal researchers suggest

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New research suggests that some women who routinely experience pain during sex may not have a sexual dysfunction, but may actually have an unusually low pain threshold.

Some women who routinely experience pain during sex may not, as has been believed, have a localized physical problem or a sexual dysfunction, Montreal researchers suggest.

Instead, some women who suffer from a condition known as dyspareunia may actually have an unusually low pain threshold, the McGill University team reported recently in the journal *Pain*.

If they are right, clinicians will have to rethink the treatments offered these women, which tend to focus on localized solutions for what has been believed to be a localized problem.

"Now it's becoming clear to us - and we'll see if the rest of the world buys it - that it's really not just there, it's other places as well," said senior author Irv Binik, director of the sex and couple therapy service at the McGill University Health Research Institute.

"The mechanism must be more central or somewhere else. And that any therapy that's directed solely peripherally may miss the point."

Dyspareunia is a catch-all phrase - like headache or lower back pain - used to describe painful sex. It is estimated that 15 per cent of women in North America complain that they experience pain during sexual intercourse.

It has traditionally been treated either as a medical condition requiring a localized fix or a sexual dysfunction linked to earlier abuse or sexual conflict.

"Patients were bounced back and forth between medical practitioners or psychologists, sex therapists. And frankly, we didn't help many of these women altogether with either strategy alone," said Binik, who is also a professor of psychology at McGill.

Several years ago, one of his students hypothesized that dyspareunia might actually be a pain syndrome, which prompted Binik and his colleagues to start looking at the problem in a different light. After all,

women who suffered from the condition also reported that it was painful for them to insert a tampon or undergo a gynecological exam.

Caroline Pukall, a PhD candidate working under Binik, decided that for her thesis she would attempt to prove that there was something different about the genitals of women who suffer from a condition that falls under the dyspareunia umbrella, vestibular vestibulitis syndrome.

Women who have VVS, as it is called, suffer acute pain when pressure is placed against the ring of tissue surrounding the vaginal entrance, which is called the vulvar vestibule.

The test for VVS - pressing a cotton swab against the vulvar vestibule - shows how painful the condition is for sufferers.

"Normal women won't perceive that as painful, even though you might be pushing quite hard," Pukall said. "Women with VVS on the other hand, find this excruciatingly painful and they're trying to leap off the table."

Two groups of women - one with VVS, the other without - were tested to see how sensitive they were to both touch and pain. They were tested in a variety of body sites both around the genitals and elsewhere, as well as around the vulvar vestibule.

The differences were striking, Pukall said.

Women with VVS were like the title character in the fairy tale *The Princess and the Pea*, detecting touch so gentle that non-VVS sufferers were unaware of it and reporting pain when the non-VVS group was barely registering touch.

"Where women with VVS reported pain, normal control women were reporting: 'Oh, yes, I feel something,' " she admitted.

The researchers were surprised that the VVS group was so much more acutely attuned to touch, and that the heightened sense of pain was shown in other parts of the body, for instance on the deltoid muscle and on the forearm near the wrist.

This widespread phenomenon led them to the conclusion that these women have an abnormally low pain threshold and perhaps should be classified as chronic pain sufferers.

Binik admitted, however, that it may take some work to convince others in his field that VVS is a more diffuse condition than has been thought.

"It's widely accepted in our laboratory . . . but I think we have a long way

to go to convince the world to think this way," he said. "I think most people think it's either pathology or it's sexual conflict in the head."
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