



# What You Should Know About Risks of Being Sexual at Midlife

**M**any women remain sexually active as they get older. One study showed that 65% of women aged 50 to 59 years reported sexual activity within the last 3 months. We now know, however, that there is a higher risk than previously thought for sexually transmitted infections and unintended pregnancy. One reason is that many women become single again—from separation, divorce, or widowhood—and have new partners.

## What new sexual risks may be present at midlife?

There are several explanations why women during peri- and postmenopause are susceptible to sexually transmitted infections (STIs) and unintended pregnancy:

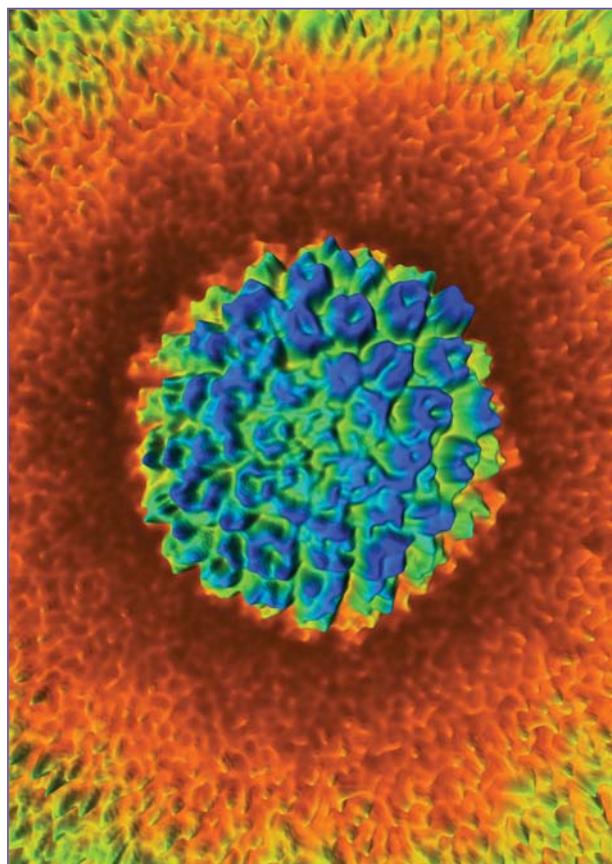
- Newly single women may have a new sexual partner, or several partners. Safe sex practices may not be uppermost on their minds.
- The loss of estrogen makes vaginal tissue more fragile, causing tears that leave openings for viral or bacterial infection.
- Older women exposed to an STI such as chlamydia, genital herpes, or human papillomavirus (HPV) might have worse reactions than younger women.
- Having less predictable menstrual cycles and being uninformed of current contraception options can lead to unintended pregnancy.

## What precautions can I take to ensure safe sex?

Recent research shows that women want to discuss their sexual health with their health care providers but prefer that the provider initiate the conversation. Sex is not an easy topic for anyone. Health care providers will want to know if you are having a sexual relationship, with whom, and if you are using protection for both STIs and pregnancy.

### Precautions against a new STI

- Get regular checkups and STI screenings if you are sexually active—in either a monogamous or new relationship.
- Expect your sexual partners to be tested as well.
- Choose partners carefully and discuss your sexual relationship openly.
- Insist that a partner use a latex condom—the primary tool to prevent STI transmission.



### Precautions against an unintended pregnancy

- Hormonal contraceptives (pill, patch, ring, or injection)
- Intrauterine devices (IUDs) with or without hormones
- Barrier methods (diaphragm plus spermicide, spermicide-containing sponge, spermicide alone, male and female condoms)
- Sterilization (tubal ligation or fallopian tube implants for women; vasectomy for men)

### The good news

Each woman, in collaboration with her health care provider, can create a plan to proactively maintain her sexual health and protect herself and her partner against risks.

### Where can I learn more information?

For more information about your sexual health at midlife, including causes and treatments, see “Sexual Health & Menopause” on The North American Menopause Society’s website at [www.menopause.org/sex.aspx](http://www.menopause.org/sex.aspx).