



Sex and the Female Ostomate Fact Sheet

– Page 1 of 2 –

Making Love

After surgery, while you are recovering and learning to manage your ostomy, you may not experience any sexual feelings for days, weeks, or even months. On the other hand, you may begin to focus on sexual feelings while still in the hospital. You need to let your partner know what to expect from you about intimacy and sex.

Women recovering from ostomy surgery worry about many things: How they will look to themselves and if they will still be attractive to others, will there be pain, how to manage the pouch before, during and after sex. Remind yourself that your lovableness and self-worth do not depend on a body part.

If the rectum has been removed, the whole position and structure/size of your vagina may feel different. Be aware that for some women it is either uncomfortable and/or painful.

Your vagina may feel too small or too tight. You may not come to orgasm the first time if things are too strange and different.

An intimate relationship is one in which it matters how well you can communicate about this intimate experience. Your partner will take the cue from you. But do not forget that your partner's feelings are real, too, and they should not be denied any more than your own.

Potential Problems

The longer you lived with the conditions of disease process, the longer you adjusted your sexual activities to the limitation they placed on you. This will now change with some caring and sharing on both your parts. A helpful task for you now is to sort through these limitations to determine if they were from the illness or “ancient history” experiences.

Pain blocks good sexual feelings. Remember that the rectal-genital area consists of soft tissue that is rich in blood vessels and nerves; tissues like this bruise and swell easily when traumatized. They take time to heal. Another source of pain is lack of lubrication.

Most women who have experienced painful post-operative intercourse say that the pain diminishes with time, hormonal creams or lubricants, relaxation, gentle thrusting, and manual stimulation.

Factors Which Influence Sexual Intimacy

1. Desire. Sometimes you may experience little or no desire for sex. Illness and medical treatments often lower sexual desire as do pain, medication and just plain not feeling well. A change in body image and lowered self-esteem interfere with sexy feelings. Fatigue, depression, anxiety or anger is likely to dampen desire.

2. **Loss and Grief.** Ostomy surgery means a major change in your body. Even if your surgery has brought an end to years of illness and discomfort, or has been to cure a life-threatening disease, it still represents the loss of a natural body function. Not infrequently, grief is experienced as anger or fear.
3. **Body Image.** Body image is the way we see ourselves in the mirror and like to imagine our appearance. Although the change seems so great to oneself, most others do not see the ostomy as changing in any major way the person they love. Harmony within oneself precedes harmony in a relationship.
4. **Medications.** Drugs taken during illness and surgery may affect sexual behavior. Each person reacts individually to medication. Anesthesia can leave a person feeling off center for quite some time.
5. **Surgical Procedures.** If the rectum has been removed along with the colon, there may be a different sensation in the vagina during intercourse since part of its supporting structure is gone. In some women the angle of the vaginal barrel changes penetration, and orgasm may be harder to achieve. The uterus may change position, leading to difficulties in conception. If radiation therapy has been received, there may be vaginal tenderness and dryness.

Talking About Sex

It is your right to share or not to share information about your body. Sharing information about your ostomy may not be easy. If you find someone with whom you want to share a sexual relationship, then you need to decide when and how much you want to share about your operation.

Many a loving partner of an ostomate has admitted to feeling anger and resentment towards a sick mate. Such feelings are natural. Until they have been expressed and worked out, both of you may feel guilty and unlovable. There is nothing more frustrating and painful than dealing with a partner who refuses to talk about important issues in a relationship such as sex, anger, fear, rejection, or the ostomy. Going together to a professional counselor may be the answer.

Seek Professional Advice

Any sexual difficulty should be addressed by medical professionals, first the ostomy surgeon and/or the WOC(ET) or ostomy nurse. Referrals may be made to gynecologist, therapist or counselors.

Note: More detailed information can be found in *Intimacy, Sexuality and an Ostomy*, a publication of the United Ostomy Association. Contact UOA at 1-800-826-0826