Sex after stroke

A stroke can cause physical and emotional problems that have an impact on your sex life. This guide helps you understand sexual problems after stroke, and offers practical advice and sources of help.

What can cause problems with sex after stroke?

It’s very common to feel that a stroke has affected your relationships, including your sex life. There are several reasons why you may have difficulties with sex after a stroke, including emotional changes, relationship problems and physical disabilities. But remember that many sexual problems can be treated. Whether your difficulties are physical or emotional, you may find it helpful to speak to a health professional like a GP or therapist for information and advice.

Emotional changes

It’s not unusual to feel low or depressed after a stroke, and this can make you feel as if you have lost interest in sex. Stroke can change your life in many ways. Perhaps you feel that you’ve lost your independence or that your relationships with your partner, family and friends are not the same as before. Your stroke may also have damaged parts of your brain that are linked to the emotions, leading to problems with controlling your emotions. Some people have difficulty controlling their mood, and seem angry or irritable, which can put a strain on your relationship.

In rare cases, people find that their sexual desire increases or they lose their inhibitions after a stroke. This can cause their behaviour to change, so they may talk openly about sex to people they don’t know very well, for example. This can be upsetting and embarrassing for the people around them. This is a difficult problem to deal with, but help is available. Talk to your doctor, who should be able to offer advice and refer you to a specialist for help, if needed.

Relationship problems

Your stroke is likely to be just as life-changing for your partner as it is for you, which can put your relationship under a lot of strain. Your roles may change, which can take some time to get used to. If your partner is helping to care for you, it could affect the balance of your relationship. Other things can affect intimacy, like communication difficulties and depression. Having a stroke can affect your confidence and self-image, and you may feel less confident.

You may both find it difficult to talk about how you feel, because you think you should ‘stay strong’ for your partner. But if you don’t discuss your feelings, tension and resentment can build up between you both. It may be that one of you would like to have...
sex, while the other has lost interest in it. This could become a source of tension if it is not resolved. Openly discussing your feelings, listening to each other, and recognising how you both feel is the first step in sustaining a positive, healthy relationship.

If you are single, a stroke can sometimes pose difficulties if you are looking for a new relationship. For example, it can be tough if you have problems with mobility or communication difficulties. A stroke can affect your confidence and self-esteem, which can also make it harder to talk to people. However, many people establish happy, healthy relationships after a stroke.

**Physical problems**

Muscle weakness or spasticity (muscle stiffness) may restrict how you move and how you can position yourself during sex. Spasticity can cause pain which could affect your enjoyment of sex.

Changes to sensation can make you less sensitive to touch, or you might experience painful sensations like pins and needles.

Tiredness and fatigue are very common problems after stroke. If your stroke has affected your mobility, simple daily tasks can be more tiring than they used to. Fatigue means tiredness that does not get better with rest, and is a common condition for stroke survivors. Tiredness and fatigue can make it harder for you to do many of the activities you used to enjoy, including sex.

Continence problems may be a source of worry or embarrassment, and you may avoid sex because of it. Catheters can cause practical difficulties when having sex as well.

Hormone imbalances can sometimes be due to a stroke, leading to a wide range of problems including difficulty getting an erection in men or low sexual desire in women. This can happen when a stroke affects the parts of your brain that are important for controlling hormones.

Other medical conditions (such as diabetes, epilepsy or heart disease) and the medication you take for them can make it difficult for men to get an erection or reach orgasm, and can also lower sexual desire and reduce vaginal lubrication in women.

**Can sex cause a stroke?**

Some people avoid sex because of a fear that it will cause another stroke. While it is true that your blood pressure can rise when you orgasm, you’re no more likely to have a stroke during sex than at any other time.

A rare exception to this is for people who have had a subarachnoid haemorrhage (bleeding on the brain) due to a burst aneurysm. It is thought that having a sudden rise in blood pressure caused by a physical activity such as sex sometimes has the potential to trigger a bleed. However, if your aneurysm and other risk factors like smoking and high blood pressure are being treated, this risk should be very small. Talk to your GP about the treatment you have had, and ask for more information about your risk of having another bleed.

Whatever the cause of your stroke, you can visit your GP to ask for help with reducing your risk of another stroke.
What can help sexual problems?

The first step in dealing with any problem is to talk about it. This isn’t always easy, and you may find it difficult or embarrassing to talk about things like a lack of desire or not being able to get an erection. However, these kinds of problems can affect anyone at any time – not just people who have had a stroke. Talking and being open about your feelings can help your relationships, and might also help in dealing with sexual problems. Many people want advice about sex and relationships after a stroke, and there is help and information available.

It’s also important to look after yourself. Try to have an active, healthy lifestyle, including eating a healthy diet and doing regular gentle exercise. This can help improve your overall health, as well as your sexual wellbeing.

Help with emotional changes

Get help with depression

If you’re feeling low or depressed, talk to your doctor or another healthcare professional, as there are several ways they can help. Your doctor may recommend talking therapies like counselling. Talking therapy gives you time and space to talk about difficult feelings with a trained therapist. Taking medication, most often antidepressants, may also help. Some medications can cause loss of libido as a side effect, but you may be able to try different types to find what works best for you. Tell your doctor if you experience any problems.

Reduce anxiety about sex

Few people feel like having sex when they are tense and anxious, so it’s worth giving yourself time to get in the mood beforehand. Choose a time when you and your partner are both relaxed and can be sure you won’t be interrupted. Showing affection to each other is really important. Every couple has their own way of doing it, but you could try hugs, running a bath for your partner or simply giving them a compliment.

Above all, remember that sex is not a performance. You don’t have to ‘succeed’ or ‘fail’ and it doesn’t always happen perfectly every time. Remember there are various ways to express your feelings and be close to another person. You could start by getting to know your partner physically again without attempting to reach orgasm. Most people get pleasure from touching, kissing, cuddling and massage.

This guide can only give general information. You should always get individual advice about your own health and any treatment you may need from a medical professional such as a GP, pharmacist or nurse. You can access emotional support through your GP, or by contacting a psychology professional such as a counsellor.
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Help with relationship problems

Talk about your feelings

Talk to your partner about the things you’re finding difficult, and try to work out what you could both do to make things easier. Tell them how you are feeling, and listen to what they want to say.

You may feel awkward about bringing up the subject of sex, but having an honest conversation about what you are finding difficult is the first step to making changes. Set aside a time to talk when you won’t be interrupted, and choose a place where you both feel comfortable. Sometimes it’s easier to talk about sex away from the bedroom, so neither of you feels under pressure. Take it in turns to talk and listen carefully to each other.

Professional help with relationships

Talking about your feelings is difficult, even with someone close to you, so it can often help to get professional support. Relationship counselling can give you a safe space to find a way through the difficulties you’re facing. You can have counselling whether you are single or in a couple.

If you’re in a couple, you can choose to go alone or with your partner. Usually a counsellor will ask you questions so that you, and your partner if you have one, can talk about what’s going on and how you feel.

Sex therapy can help you focus on your physical relationship. A sex therapist can help you work out how to handle problems and find a solution that works for both of you. All the work you do with a therapist will be based on talking, but they will be able to offer you advice and suggest things for you to try at home. See Other sources of help and information later in this guide for details of organisations that provide relationship counselling and sex therapy.

If you have communication problems like aphasia or dysarthria, your speech and language therapist can help you and your partner find a way to communicate with each other. It can be difficult, but try to be patient – things will get better with time and you’ll find a way to say what you want to each other.

Help with physical problems

Muscle weakness or spasticity

If you have weakness down one side or muscle stiffness, finding the right position for sex may be a case of trial and error. That doesn’t have to be a bad thing – think of it as an opportunity to explore what you can do in bed. You may find that lying on your side is more comfortable. If one side of your body is weaker than the other, lying on your weak side will leave your stronger arm free.

Using lubricants during sex can reduce pain and improve your enjoyment. Talk to your physiotherapist or occupational therapist, who will be able to give you practical advice.

Spasticity can cause muscle pain, but there is treatment available to reduce this. If you are using pain medication for spasticity, you could think about the times for intimacy at the times of day when the medication is most effective for you. For more information about treating pain, read our guide F30, Pain after stroke.
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**Tiredness and fatigue**

If you often feel very tired, try having sex in the morning or at the times of day when you feel you have more energy. For more information about fatigue, read our guide F18, *Fatigue after stroke*.

**Side effects of medication**

If you suspect a medication is affecting your sex life, talk to your doctor about it. They may be able to change your prescription, but never stop taking a drug without talking to your doctor first.

**Erection problems**

If you’re a man having problems getting or maintaining an erection, it’s important to tell your GP. Erection problems can be a sign of health problems like heart disease, high blood pressure and diabetes. Your GP can treat any underlying health conditions that may be causing your problems. Although it can feel embarrassing to talk about, it could be vital for your health.

If an erection problem is due to the effects of a stroke, some practical solutions and treatments are available.

- **Lifestyle changes**
  
  Some practical steps like losing weight if you need to, stopping smoking, and cutting back on alcohol can help with erection problems. Becoming more physically active if you can, reducing stress and treating symptoms of anxiety and depression can also benefit you.

- **Drugs to improve an erection**
  
  Drugs called phosphodiesterase-5 (PDE-5) inhibitors work by temporarily increasing the blood flow to your penis. The most well-known of these is Viagra, and other brand names include Cialis, Levitra and Spedra. However, these should be avoided for the first three months after stroke and until your blood pressure is under control.

  You may not be able to take them if you have heart disease, low blood pressure, or are taking some types of medication for high blood pressure. You may not be able to use this drug if you are at risk of priapism, a painful, long-lasting erection which can happen to men with sickle cell disease. Some side effects of these drugs include headaches, flushed skin and nausea.

- **Vacuum pumps**
  
  These are clear plastic tubes that you place over your penis. The tube is connected to a pump, which removes the air. This creates a vacuum around your penis, which causes blood to flow into it, making it erect. A vacuum pump should not be used if you are also taking anticoagulant medication (for example warfarin).

- **Alprostadil**
  
  This is an artificial hormone, often given in the form of a small pellet. It is inserted into the urethra (the tube that carries urine from your bladder to the tip of your penis) using a special applicator. It helps to increase the blood flow in your penis, to produce an erection after five to 15 minutes. Alprostadil is also available as an injection.
You may not be able to use this drug if you are at risk of priapism, a painful, long-lasting erection which can happen to men with sickle cell disease. Alprostadil's possible side effects include low blood pressure and dizziness.

**Vaginal dryness**

When a woman becomes aroused, her vagina should become naturally moist and lubricated. If this doesn't happen, sex can be sore or painful. The main treatments you can try are:

- **lubricants** you can apply during sex. These are usually liquids or gels, and are available without a prescription

- **vaginal moisturisers** are gels or creams you can use regularly, to keep the vagina moist

- **vaginal oestrogen** can help women with vaginal dryness linked to the menopause, but you may not be able to use it if you have had an ischaemic stroke or TIA

- **hormone replacement therapy (HRT)** can help women with vaginal dryness linked to the menopause. Some women will be advised not to take HRT tablets but can use skin patches. If you have had an ischaemic stroke (caused by a clot), have high blood pressure or are aged over 60, ask your GP about the best option for you.

**Continence problems**

If you have continence problems, try emptying your bladder just before sex. A plastic covering on your bed may give you peace of mind. If you have a catheter, your doctor or nurse can show you how to remove and replace it. Your doctor or nurse can give you a valve that allows you to remove the drainage bag during sex. If you’re a woman, you may find it helpful to tape your catheter forwards and to one side using surgical tape. Men can bend the catheter back along their penis and hold it in place with either surgical tape or a condom.

**Sexual health and contraception**

Talk to your GP or visit a local sexual health clinic to get advice about sexual health and contraception.

**Preventing pregnancy**

Women who have had an ischaemic stroke or transient ischaemic attack (TIA) probably won’t be able to use the combined oral contraceptive pill (combi pill). The combi pill contains oestrogen which raises the risk of blood clots. Contraceptive implants, patches and intrauterine systems (IUS) also contain hormones, but some don’t include oestrogen. There are also non-hormonal options such as condoms, the contraceptive cap, and intrauterine devices (IUD). Visit your GP or a local sexual health clinic for help with choosing the best one for you.

**Sexual health**

To avoid sexually transmitted infections, you need to use a male or female condom, and for oral sex you should use a latex or polyurethane square. If you use condoms, don’t use oil-based lubricants or creams, as they can make the condom more likely to leak.
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Where to get help and information

From the Stroke Association

Talk to us
Our Stroke Helpline is for anyone affected by a stroke, including family, friends and carers. The Helpline can give you information and support on any aspect of stroke.

Call us on 0303 3033 100, from a textphone 18001 0303 3033 100 or email info@stroke.org.uk.

Read our publications
We publish detailed information about a wide range of stroke topics including reducing your risk of a stroke and rehabilitation. Read online at stroke.org.uk or call the Helpline to ask for printed copies.

My Stroke Guide
My Stroke Guide is the stroke support tool and online community from the Stroke Association. Log on at mystrokeguide.com.

Our Enquiry Line can support you with using My Stroke Guide: call 0300 222 5707 or email mystrokeguide@stroke.org.uk.

Other sources of help and information

College of Sexual and Relationship Therapists (COSRT)
Website: www.cosrt.org.uk
Tel: 020 8543 2707
Governing body for sexual and relationship therapists. Has a list of private therapists and information about therapy and common problems on their website.

Family Planning Association (FPA)
Website: www.fpa.org.uk
Helpline (Northern Ireland only):
0345 122 8687
UK-wide sexual health charity offering information and support. Provides expert advice on topics such as pleasure and contraception.

LGBT Foundation
Website: www.lgbt.foundation
Tel: 0345 330 30 30
LGBT Foundation is a national charity delivering a wide range of services to lesbian, gay and bisexual and transgender (LGBT) communities. It provides counselling for individuals and couples and a helpline offering information and support.

NHS One You Sexual Health
Website: www.nhs.uk/oneyou/sexual-health
Sexual Health Helpline: 0300 123 7123
Website and helpline managed by Public Health England that offers a broad range of health and wellbeing advice.

Outsiders
Website: www.outsiders.org.uk
Helpline: 07770 884 985
A free club for people with disabilities. The club can be used as a dating site or simply for friending and support. The Outsiders Trust also offer support on relationships, sexuality and dating.

Relate (England and Wales)
Website: www.relate.org.uk
Tel: 0300 100 1234

Relate Northern Ireland
Website: www.relateni.org
Tel: 0289 032 3454
Offers relationship and sex counselling (face-to-face, online and via telephone). There is also lots of useful information on their websites.
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Relationships Scotland
Website: www.relationships-scotland.org.uk
Tel: 0345 119 2020
Provides relationship counselling, family mediation, child contact centres and other family support services across all of mainland and island Scotland.

Sexual Advice Association
Website: www.sexualadviceassociation.co.uk
A charity that produces factsheets about sexual problems and how to find support.

Spokz
Website: www.spokz.co.uk
Tel: 01543 899317
Makes disability equipment including equipment to help with sex if you have weakness or paralysis.

The ultimate guide to sex and disability: for all of us who live with disabilities, chronic pain, and illness
Miriam Kaufman
Cleis Press, 2007
A guide covering everything you need to know about creating a sex life that works for you. It covers how to build a positive sexual image of yourself, advice on sexual positions and how to talk to your partner about sex and disability.

About our information
We want to provide the best information for people affected by stroke. That’s why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.

How did we do?
To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at feedback@stroke.org.uk.

Accessible formats
Visit our website if you need this information in audio, large print or braille.

Always get individual advice
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Together we can conquer stroke.

For more information visit stroke.org.uk