

Sexuality in Later Life

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Many people want and need to be close to others as they grow older. For some, this includes the desire to continue an active, satisfying sex life. With aging, that may mean adapting sexual activity to accommodate physical, health, and other changes.

There are many different ways to have sex and be intimate—alone or with a partner. The expression of your sexuality could include many types of touch or stimulation. Some adults may choose not to engage in sexual activity, and that's also normal.

Here, we explore some of the common problems older adults may face with sex.

What Are Normal Changes?

Normal aging brings physical changes in both men and women. These changes sometimes affect the ability to have and enjoy sex.

A woman may notice changes in her vagina. As a woman ages, her vagina can shorten and narrow. Her vaginal walls can become thinner and a little stiffer. Most women will have less vaginal lubrication, and it may take more time for the vagina to naturally lubricate itself. These changes could make certain types of sexual activity, such as vaginal penetration, painful or less desirable. If [vaginal dryness](#) is an issue, using water-based lubricating jelly or lubricated condoms may be more comfortable. If a woman is using hormone therapy to treat [hot flashes](#) or other menopausal symptoms, she may want to have sex more often than she did before hormone therapy.

As men get older, impotence (also called erectile dysfunction, or ED) becomes more common. ED is the loss of ability to have and keep an erection. ED may cause a man to take longer to have an erection. His erection may not be as firm or as large as it used to be. The loss of erection after orgasm may happen more quickly, or it may take longer before another erection is possible. ED is not a problem if it happens every now and then, but if it occurs often, talk with your doctor.

Talk with your partner about these changes and how you are feeling. Your doctor may have suggestions to help make sex easier.

What Causes Sexual Problems?

Some illnesses, disabilities, medicines, and surgeries can affect your ability to have and enjoy sex.

Arthritis. Joint pain due to [arthritis](#) can make sexual contact uncomfortable. [Exercise](#), drugs, and possibly joint replacement surgery may help relieve this pain. Rest, warm baths, and changing the position or timing of sexual activity can be helpful.



Chronic pain. Pain can interfere with intimacy between older people. [Chronic pain](#) does not have to be part of growing older and can often be treated. But, some pain medicines can interfere with sexual function. Always talk with your doctor if you have [side effects from any medication](#).

Dementia. Some people with [dementia](#) show [increased interest in sex and physical closeness](#), but they may not be able to judge what is appropriate sexual behavior. Those with severe dementia may not recognize their spouse or partner, but they still desire sexual contact and may seek it with someone else. It can be confusing and difficult to know how to handle this situation. Here, too, talking with a doctor, nurse, or social worker with training in dementia care may be helpful.

Diabetes. This is one of the illnesses that can cause ED in some men. In most cases, medical treatment can help. Less is known about how [diabetes](#) affects sexuality in older women. Women with diabetes are more likely to have vaginal yeast infections, which can cause itching and irritation and make sex uncomfortable or undesirable. Yeast infections can be treated.

Heart disease. Narrowing and hardening of the arteries can change blood vessels so that blood does not flow freely. As a result, men and women may have problems with orgasms. For both men and women, it may take longer to become aroused, and for some men, it may be difficult to have or maintain an erection. People who have had a heart attack, or their partners, may be afraid that having sex will cause another attack. Even though sexual activity is generally safe, always follow your doctor's advice. If your [heart problems](#) get worse and you have chest pain or shortness of breath even while resting, your doctor may want to change your treatment plan.

Incontinence. Loss of bladder control or leaking of urine is more common as people, especially women, grow older. Extra pressure on the belly during sex can cause loss of urine. This can be helped by changing positions or by emptying the bladder before and after sex. The good news is that [incontinence](#) can usually be treated.

Stroke. The ability to have sex is sometimes affected by a [stroke](#). A change in positions or medical devices may help people with ongoing weakness or paralysis to have sex. Some people with paralysis from the waist down are still able to experience orgasm and pleasure.

Depression. Lack of interest in activities you used to enjoy, such as intimacy and sexual activity, can be a symptom of [depression](#). It's sometimes hard to know if you're depressed. [Talk with your doctor](#). Depression can

be treated.

Surgery. Many of us worry about having any kind of surgery—it may be even more troubling when the breasts or genital area are involved. Most people do return to the kind of sex life they enjoyed before surgery.

Hysterectomy is surgery to remove a woman's uterus because of pain, bleeding, fibroids, or other reasons. Often, when an older woman has a hysterectomy, the ovaries are also removed. Deciding whether to have this surgery can leave both women and their partners worried about their future sex life. If you're concerned about any changes you might experience with a hysterectomy, talk with your gynecologist or surgeon.

Mastectomy is surgery to remove all or part of a woman's breast because of [breast cancer](#). This surgery may cause some women to lose their sexual interest, or it may leave them feeling less desirable or attractive to their partners. In addition to talking with your doctor, sometimes it is useful to talk with other women who have had this surgery. Programs like the American Cancer Society's "[Reach to Recovery](#)" can be helpful for both women and men. If you want your breast rebuilt (reconstruction), talk to your cancer doctor or surgeon.

Prostatectomy is surgery that removes all or part of a man's [prostate](#) because of cancer or an enlarged prostate. It may cause [urinary incontinence](#) or ED. If you need this operation, talk with your doctor before surgery about your concerns.

Medications. Some drugs can cause sexual problems. These include some [blood pressure](#) medicines, antihistamines, antidepressants, tranquilizers, [Parkinson's disease](#) or cancer medications, appetite suppressants, drugs for mental problems, and ulcer drugs. Some can lead to ED or make it hard for men to ejaculate. Some drugs can reduce a woman's sexual desire or cause vaginal dryness or difficulty with arousal and orgasm. Check with your doctor to see if there is a different drug without this side effect.

Alcohol. [Too much alcohol](#) can cause erection problems in men and delay orgasm in women.

Am I Too Old to Worry About Safe Sex?

Age does not protect you from sexually transmitted diseases. Older people who are sexually active may be at risk for diseases such as syphilis, gonorrhea, chlamydial infection, genital herpes, hepatitis B, genital warts, and trichomoniasis.

Almost anyone who is sexually active is also at risk of being infected with HIV, the virus that causes AIDS. The number of older people with [HIV/AIDS](#) is growing. You are at risk for HIV/AIDS if you or your partner has more than one sexual partner, if you are having unprotected sex, or if either you or your partner is sharing needles. To protect yourself, always use a condom during sex that involves vaginal or anal penetration.

A man needs to have a full erection before putting on a condom.

Talk with your doctor about ways to protect yourself from all sexually transmitted diseases and infections. Go for regular checkups and testing. Talk with your partner. You are never too old to be at risk.

Can Emotions Play a Part?

Sexuality is often a delicate balance of emotional and physical issues. How you feel may affect what you are able to do and what you want to do. Many older couples find greater satisfaction in their sex lives than they did when

they were younger. In many cases, they have fewer distractions, more time and privacy, no worries about getting pregnant, and greater intimacy with a lifelong partner.

As we age, our bodies change, including our weight, skin, and muscle tone, and some older adults don't feel as comfortable in their aging bodies. Older adults, men and women alike, may worry that their partners will no longer find them attractive. Aging-related sexual problems like the ones listed above can cause stress and worry. This worry can get in the way of enjoying a fulfilling sex life.

Older couples face the same daily stresses that affect people of any age. They may also have the added concerns of illness, retirement, and lifestyle changes, all of which may lead to sexual difficulties. Talk openly with your partner, and try not to blame yourself or your partner. You may also find it helpful to talk with a therapist, either alone or with your partner. Some therapists have special training in helping with sexual problems. If you sense changes in your partner's attitude toward sex, don't assume they are no longer interested in you or in an active sex life. Talk about it. Many of the things that cause sexual problems in older adults can be helped.

What Can I Do?

There are things you can do on your own for an active and enjoyable sex life. If you have a long-term partner, take time to enjoy each other and to understand the changes you both are facing.

Don't be afraid to talk with your doctor if you have a problem that affects your sex life. He or she may be able to suggest a treatment. For example, the most common sexual difficulty of older women is painful intercourse caused by vaginal dryness. Your doctor or a pharmacist can suggest over-the-counter vaginal lubricants or moisturizers to use. Water-based lubricants are helpful when needed to make sex more comfortable. Moisturizers are used on a regular basis, every 2 or 3 days. Or, your doctor might suggest a form of [vaginal estrogen](#).

If ED is the problem, it can often be managed and perhaps even reversed with medication or other treatments. There are pills that can help. They should not be used by men taking medicines containing nitrates, such as nitroglycerin. The pills do have possible side effects. Be wary of any [dietary or herbal supplements](#) promising to treat ED. Always talk to your doctor before taking any herb or supplement.

Physical problems can change your sex life as you get older. If you are single, dating and meeting new people may be easier later in life when you're more sure of yourself and what you want. If you're in a relationship, you and your partner may discover new ways to be together as you get older. Talk to your partner or partners about your needs. You may find that affection—hugging, kissing, touching, and spending time together—can be just what you need, or a path to greater intimacy and sex.

Read about [this topic in Spanish](#). Lea sobre [este tema en español](#).

For More Information About Sexuality in Later Life

American College of Obstetricians and Gynecologists

800-673-8444 (toll-free)

resources@acog.org

www.acog.org

HealthInAging Foundation

800-563-4916 (toll-free)

info@healthinaging.org

www.healthinaging.org

National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)

800-860-8747 (toll-free)

866-569-1162 (TTY/toll-free)

healthinfo@niddk.nih.gov

www.niddk.nih.gov

MedlinePlus

National Library of Medicine

www.medlineplus.gov

Services & Advocacy for Gay, Lesbian, Bisexual & Transgender Elders (SAGE)

212-741-2247

info@sageusa.org

www.sageusa.org

Urology Care Foundation

800-828-7866

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Content reviewed: November 30, 2017