



ORIGINAL RESEARCH ARTICLE

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## SATISFACTION OF SEXUAL ACTIVITY VERSUS THE QUANTITY OF GESTATIONS AND THE USE OF MEDICINES

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### ABSTRACT

The sexual life of women undergoes various modifications throughout life, from the discovery of the sexual act to gestation, as well as the transition to menopause. In view of the foregoing, the present study aims to evaluate the satisfaction of sexual activity versus the number of pregnancies and the use of medication of employees of the Public Health Foundation of Vitória da Conquista - FSVC. This is an epidemiological and cross-sectional study, with a retrospective and descriptive character and a quantitative approach. The sample consisted of 100 women, whose age ranged from 20 to 45 years. The interviewees answered a questionnaire structured by the research project, which contained information on socio-demographic and socioeconomic aspects such as: marital status (single or married), age and number of pregnancies. We used the Elder Abuse questionnaire: *A multinational Prevalence Survey (ABUEL)* for the analysis of sexual interest, the WHOQOL-BREF. In our study we did not find significant values to associate with sexual dysfunction in our sample, however, it is worth remembering that care and special attention are needed for those women who reported having had sexual problems and loss of libido / gestation.

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### INTRODUCTION

The sexual life of women undergoes several changes throughout life, from the discovery of the sexual act to gestation, as well as the transition to menopause (Carolina, Savall, Mendes, & Cardoso, 2008; Psychology, 2013). The pregnancy and post-pregnancy period is marked by various physical, psychological and social changes, not restricted only to women, but also to partners. These changes cover the aesthetic and physical, psychic and family members, and there may be changes in the continuity of sexual satisfaction (Franceschet, Sacomori, & Cardoso, 2009; Silva, Figueiredo, Isabel, & Licenciada, 2005). In the pregnancy period, changes in the physiology, physiognomy and behavior of the woman and of her partner, feeling more fragile, cannot handle all the external organic changes, which may cause discomfort during the sexual act (Silva et al., 2007, 2005).

Throughout the puerperal period, up to 86% of the women present complaints of sexual dysfunctions (Vettoraziet al., 2012), being important the adequate orientation regarding sexuality in gestation by health professionals who perform prenatal care (Barbosa et al., 2011; Franceschet et al., 2009). With the turbulences of the new life, all the difficulties and responsibilities, physical and psychological alterations can present psychosomatic repercussions. In this period the use of drugs can be seen and it is believed that 80% of the women use them during pregnancy, either for pain due to postural changes or for problems of anxiety and depression (Costa, Coelho, & Santos, 2017). In view of the foregoing, the present study aims to evaluate the satisfaction of sexual activity versus the number of pregnancies and the use of medication of employees of the Public Health Foundation of Vitória da Conquista - FSVC.

### MATERIALS AND METHODS

This is an epidemiological and cross-sectional study, with a retrospective and descriptive character and a quantitative

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approach, carried out in the city of Vitória da Conquista, Bahia. This city has approximately 348,718 inhabitants. The same is a subproject entitled "Epidemiological Profile of Chronic Diseases in the Municipality of Vitória da Conquista / BA". The data were collected between August 2016 and October 2018. Participants composed an intentional sampling *focus group* (focused on particular groups), and the employees of the Public Health Foundation of Vitória da Conquista (FSVC) were selected. The sample consisted of 100 women, whose age ranged from 20 to 45 years. All participants were explained about the nature of the work, benefits and harms, and were directed to sign the Informed Consent Form (TCLE). As inclusion criterion, the majority of the women were women, pregnant and non-pregnant, who had agreed to the terms of the survey and all were employees of the Public Health Foundation of Vitória da Conquista. Women under 18 and over 45 years of age, women who were bedridden and pregnant women at risk were excluded from the study. The interviewees answered a questionnaire structured by the research project, which contained information on socio-demographic and socioeconomic aspects such as: marital status (single or married), age and number of pregnancies. We used the Elder Abuse questionnaire: *A multinational Prevalence Survey* (ABUEL) on preexisting diseases to verify the use of drugs by the population studied (Rodrigues *et al.*, 2018). For the analysis of sexual interest, the WHOQOL-BREF quality of life questionnaire was used and the answers were collected in a dichotomized "lost" and "did not lose" sexual interest. In the statistical analysis, Pearson's chi-square was used with a significance level of 5% ( $p < 0.05$ ), using the statistical program SPSS®, version 25.0. Participants were clarified about the study and the methods to be used for collection, and to participate in the research, signed the Free and Informed Consent Form (TCLE) in which it contained data pertinent to the ethical aspects according to Resolution 466/12 (National Council of Health), which constitutes international documents of ethical concepts and research involving human beings.

## RESULTS AND DISCUSSION

Total of 100 adult women, employees of the Public Health Foundation of Vitória da Conquista - FSVC, participated in the study, who wanted to answer the questionnaires, but some of them did not answer all the questions: 7 women did not respond sexual interest; 4 did not respond on the use of pain medication; 22 did not respond to the use of sleeping pills; 5 did not respond on the use of medication for anxiety and 5 did not respond on the use of medication for depression. In the description of the sample, it was noticed that most of the women reported not having lost their sexual interest during and after gestation (72%), most reported having type 1 to 2 gestations, representing 51% of women, followed by those who did not have any gestation, 35%. 58% of women reported being single. Regarding the use of drugs that most make, the use of pain medication, representing 60.4% of the sample. 73%, 91% and 89% do not use sleeping pills, anxiety and depression, respectively. In Table 1 all details of the sample are presented and described. Table 2 is shown associations in statistical analysis performed using the chi-square test for association between variables Pearson, it was realized that there was no significant associations value, showing that the variables do not have statistical association in our sample. In all cases and variables, most of the women had not lost their sexual interest, however, it is worth noting and paying attention to those women who lost interest and investigating which motives

interfered in their quality of life, since a few women can in the present study, few have presented and claimed to use any medication for common mental disorders (anxiety and depression) however, it is worth the alert for the care of these mothers. In our sample, it was noticed that most women report being single, which may have been a bias of confusion, and for not having a partner in did not know how to report the loss of sexual interest in a relationship, especially in relation to the child's father.

**Table 1. Sample description**

Variables		n	%
Sexual interest	Not lost	67	72
	Lost	26	28
status	MaritalSingle	58	58
	Married	42	42
N ° Gestations	None	35	35
	1 a 2 Gestations	51	51
	3 a 4 Gestations	9	9
	5 or more	5	5
Pain medication	Took	58	60.4
	Do not take	38	39.6
Sleeping medication	Takes	5	6.4
	Does not take	73	93.6
Anxiety medication	Takes	4	4.2
	Does not take	91	95.8
Medication for depression	Takes	6	6.3
	Does not take	89	93.7

Source: own Research, 2018.

Even though there was no significant association, we noticed that women who had 1 to 2 pregnancies, 33% reported having lost their sexual interest, reinforcing the importance of the psychological contribution during the pregnancy period, clarifying that there are normalities in maintaining the sexual act, since pregnancy is low risk, and cultural taboos should be avoided. Focusing always on the psychological, physical and emotional well-being of the couple (Oliveira & Albuquerque, 2018, Piccinini & Gomes, 2008, Ribeiro, 2016).

**Table 2. Pearson's Chi-square analysis and association of the studied variables**

Variables		Sexual Interest		p-value
		Not lost n (%)	Lost n (%)	
Status	MaritalSingle	43 (75.4)	14 (24.6)	0.477
	Married	24 (66.7)	12 (33.3)	
N ° Gestations	None	28 (82.4)	6 (17.6)	0.190
	1 to 2 Gestations	32 (66.7)	16 (33.3)	
	3 to 4 Gestations	4 (57.1)	3 (42.9)	
	5 or more	3 (75)	1 (25)	
Pain Medication	Takes	38 (67.9)	18 (32.1)	0.350
	Do not take	28 (77.8)	8 (22.2)	
Sleeping medication	Take	1 (20)	4 (80)	0.040
	Do not take	49 (70)	21 (30)	
Anxiety Medication	Take	3 (50)	3 (50)	0.229
	Do not take	62 (72.9)	23 (27.1)	
Depression drug	Take	2 (50)	2 (50)	0.332
	Do not take	63 (72.4)	24 (27.6)	

Source: Own research, 2018.

## Final Considerations

In our study we did not find significant values to associate with sexual dysfunction in our sample, however, it is worth remembering that care and special attention are needed for those women who reported having had sexual problems and loss of libido / gestation. Regarding the women who reported having no gestation, most answered that they did not lose their sexual interest. It was also verified that the use of medication for pain had a very high number in relation to the sample studied. We had a larger number of single respondents who

might have caused some confusion regarding gestational responses and loss of sexual interest, since single women do not have a fixed partner as married women.

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