

Climacteric Period and Its Implications in Sexuality

O Climatério e suas Implicações na Sexualidade

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Abstract

It aims to describe how women experience their sexuality during the climacteric period. It is a descriptive study with a qualitative approach, with semi structured interviews conducted at a Health Center located in the city of Tangará da Serra - MT. The participants were 10 women in the age group from 48 to 58 years-old. From the thematic analysis process of the obtained reports, three categories emerged: Most significant changes during the climacteric period, Factors that interfere in sexuality and Perception of the woman about herself. The results point to some groupings of the recording unit which reveal that the participants' majority perceived a decrease in their sexual activity. As for the factors that influence sexuality, the most outstanding ones were aging and the marital relationship. Regarding the exercise of sexuality, the factors were restricted to the physiological changes caused by the climacteric period, and in relation to the perception of these women about themselves, the participants' majority showed a positive perception about themselves. It is concluded that it is important to develop health actions aimed at women in the climacteric period to disseminate information for a better understanding of the subject and thus to live sexuality in a healthy way for everyone at any age/period.

Keywords: Sexuality; Climacteric Period; Women's Health.

Resumo

Objetiva-se descrever como mulheres vivenciam sua sexualidade durante o período do climatério. Trata-se de um estudo descritivo de abordagem qualitativa, com realização de entrevistas com questionário semi estruturado, realizado em um Centro de Saúde localizado no município de Tangará da Serra – MT. Os participantes foram 10 mulheres na faixa etária de 48 a 58 anos. Do processo de análise temática dos relatos obtidos, surgiram 3 categorias: Mudanças mais significativas durante o climatério, Fatores que interferem na sexualidade e Percepção da mulher de si mesma. Os resultados apontam para alguns agrupamentos de unidade de registro os quais revelam que a maioria das participantes perceberam diminuição de sua atividade sexual. Quanto aos fatores que influenciam a sexualidade, os mais destacados foram o envelhecimento e o relacionamento conjugal. No que tange ao exercício da sexualidade os fatores se restringiram as alterações fisiológicas provocadas pelo climatério, e em relação à percepção destas mulheres sobre si, a maioria das participantes evidenciou uma percepção positiva sobre si mesma. Conclui-se que é importante a elaboração de ações de saúde voltadas para a mulher no climatério a fim de divulgar informações para maior compreensão acerca da temática e assim viver a sexualidade de forma saudável por todos em qualquer idade/período.

Palavras-chave: Sexualidade; Climatério; Saúde da Mulher.

Introduction

In 2015, the National Household Sample Survey (NHSS) reported that the Brazilian population has about 204.9 million people, of which the female audience accounted for 51.5% of this population. The latest survey of the resident population by sex according to age groups indicate that more than 26 million Brazilians are aged between 40 and 64 years old. Thus, about 26% of the women in Brazil are in the age group where the climacteric period occurs⁽¹⁻²⁾.

The climacteric period is defined by the gradual transition from the reproductive to the non-reproductive phase of woman's life. During this period, the woman's body undergoes several physiological changes, in which some report health complaints related to the reproductive system, but others may present symptoms that vary in their diversity and intensity. It can occur due to hormonal changes, various biological, clinical and endocrine transformations⁽³⁻⁴⁾.

This period is characterized by hormonal changes (decreased estrogen and progesterone), vaginal changes and by menopause. There are also clinical repercussions, such as the climacteric syndrome, which is defined as a set of signs and symptoms⁽⁵⁾.

At the same time, the climacteric period is an event that goes beyond biological symptoms, since women undergo profound experiences in social relations, in the spiritual, professional, conjugal and family life where these factors are influenced by the biological context for their full functioning⁽⁶⁾. The variables that are most affected after menopause are sexual desire, vaginal lubrication, and sexual satisfaction. Even so, 65.6% of the women studied reported that after menopause, they still think that sexuality is an important part of their lives⁽⁷⁾.

Even with this denial and non-acceptance aspect, sexuality during this period can be lived in a healthy way and with rewarding experiences⁽⁶⁾.

Human life consists of many dimensions and needs, including sexual life. The sexuality experience is a human experience in which various events are involved, such as: affectivity, communication, emotion, pleasure, sex, intimacy, reproduction, etc. It is experienced and expressed by relationships, attitudes, beliefs, thoughts; and is

influenced by biological, social, psychological, economic, religious, cultural and historical factors, among others⁽⁸⁾.

Based on the above, it is important to highlight that, in addition to the natural physiological changes that occur in this phase, women also face major transformations that affect their affective, emotional and psychosocial side in a varied way. Understanding the presented problem, the guiding question about the situation was elaborated: How do women experience their sexuality during the climacteric period?

In this way, the theme can contribute to the discussion and understanding of the possible obstacles that permeate the sexuality experience in the climacteric period, developing a new look on this phase of the feminine life.

The study gave voice to the elderly women to understand the meaning of their sexuality in their new life moment, aiming to describe how women experience their sexuality during the climacteric period.

Method

This is an exploratory descriptive study with a qualitative design that was carried out in a Health Center (HC) of Tangará da Serra in the State of Mato Grosso - MT. This research was developed after approval by the Research Ethics Committee of the State University of Mato Grosso (UNEMAT), under the Certificate of Presentation for Ethical Assessment (CPEA), No. 33471214.5.0000.5166. All the participants signed the Free and Informed Consent Term (FICT), through which they were informed about the measures to ensure anonymity and confidentiality regarding the origin of the obtained data. The present study obeyed the norms of research with human beings, according to Resolution No. 466/2012 of the National Health Council (NHC).

In the participants' selection, the inclusion criteria were established: women aged 40 years old or over, still observing the residence criterion, must reside in the area covered by the unit, have active sexual life and have participated at least once in health actions carried out in the community.

Information was collected between August and September 2014. The women were

approached while awaiting consultation at the unit. After this initial contact, they were sent to an environment to read the FICT and to remove doubts about the research.

The interviews that were previously authorized by the participants, allowed to absorb in an extended form the provided information. The speeches' transcripts occurred as the interviews were conducted, and when new ideas were not added, data collection was ended, thus making use of the saturation technique. After this moment, the information about the major doubts that permeated the climacteric sexuality theme was grouped. The participants were identified with fictitious names of flowers, to remain anonymous.

For the data analysis, with the obtained information, the pre-analysis was initiated, the initial objectives were resumed and some indicators that permeate the final interpretation, elaborated. As floating reading and the corpus constitution, which seek to discover the compound sense nuclei in the transcripts, observing the presence and frequency of signification units, with attention to reference values and behavior models present or underlying in the discourse⁽⁹⁾.

From the analysis, three empirical categories emerged: Most significant changes during the climacteric period, Factors that interfere in sexuality and Perception of the woman about herself.

Results and Discussion

The study population is a total of 10 women aged from 48 to 58 years old. Half (50%) of the participants were married and had a High School diploma. By analyzing the data, three categories emerged that are identified as follows: Most significant changes during the climacteric period, Factors that interfere in sexuality and Perception of the woman about herself.

The categories that emerged from the analysis explain a phenomenon and the articulation between them allowed the construction of a narrative that expresses the understanding and feelings experienced by women in the relationship between the climacteric and sexuality.

Most significant changes during the climacteric period

In this category, it was possible to identify in the speeches the most significant changes that occur during the climacteric period, describing what changed in the life of women from the climacteric period. From this category emerged three subcategories denominated: Changes in the body, Changes in the mind and Changes in the sexuality.

The subcategory Changes in the body demonstrated the physical and psychological changes that this period brings, being experienced in a particular way by each one.

The main symptoms that appear are: hot flashes on the face and neck, sudden sweats, insomnia, night sweats, headache, genital atrophy, nervousness, increased irritability and anxiety. These symptoms may be associated with a variety of factors, from hormone levels to the way women experience these changes⁽³⁾.

The symptoms most perceived by them were "hot flashes", menstrual irregularity, nervousness and irritability.

"I sweated so much in this menopause, the sweat was running a lot, a lot, very hot, sweaty hand [...]" Chrysanthemum.

"[...] I feel very hot, it seems like our blood gets very hectic. [...]" Lily.

"[...] started with the heat, is over with 50 years old, very hot, very nervous, menstruation is intercalated, there is a 2 months that is so, come and stop. Last month came, this month has not come [...]" Rosemary.

Some women mentioned that these symptoms went unnoticed by them, being considered as a quiet phase, evidencing that physical and psychological changes happened, but were considered as maturing and not loss, claiming that through healthy lifestyle habits such as physical exercise, the adoption of a balanced diet among others, these symptoms were not so shocking.

"For me it has not changed at all. I have always been a person who has cared for my life [...] I did not go through any of this because I was

prepared. I started to prepare myself taking homeopathic remedies and until today I take it. I never had these crises of nervousness, of heat, lack of patience, I did not go through it because I took care of myself [...]" Jasmine.

"In fact, I already went through this part, I did very well, I do physical activity, I always did follow-up with the food that helped and it made me enter the menopause very well. I did not need to take hormones, I did medical follow-up with the gynecologist, everything correct, no medication all through feeding and physical exercises. I do not feel these symptoms of chills, heat, insomnia, tachycardia, sweating. I went through peacefully [...]" Azalea.

"For me, it has not changed much, you know, I did not find much difference, I do not get anxious, because I do not let it get to that point, I'm not a sedentary person, I exercise, I do swimming, I work [...]" Acácia.

Thus, many women experience this period asymptotically or exhibit minimal symptoms, understand how a new stage of maturation that will give them a more confident and secure life experience, are able to live in harmony with the modifications of their body and mind⁽¹⁰⁾.

In the subcategory Changes in the mind, the main psychological symptoms are: emotional lability, anxiety, melancholy, irritability, low self-esteem, nervousness, sadness, depression and difficulty to make decisions⁽²⁾. As can be confirmed in the testimonials below:

"[...] a lot of irritability, nervousness was what was left to give and to sell [...]" Chrysanthemum.

"[...] I'm very stressed, nervous. [...] I was not like that, It was after that that I started to stay like this [...]" Lily.

"[...] after I got into menopause, anything I'm really hurt, if you say something to me, I'll start crying ... [...] for some time now, If the person says anything to me, I do not know how to respond, I just

I know how to cry, I cry, I'm very sensitive. [...]" Calla Lily.

Faced with this, the climacteric generates important psychological implications in the woman's life. The transition from reproductive to non-reproductive, changing roles within society, complex metabolic changes, the need for new adaptations, interpersonal readjustments, identity changes and the socio-cultural context in which she lives directly influences her psychological state⁽¹¹⁾.

In the subcategory Changes in sexuality, the climacteric impact on sexuality was perceived by most of the interviewed women as a period in which they observed important changes in their sexuality. Most noticed that there was a decrease in the exercise of sexuality, and this was attributed mainly to the decrease in libido and the difficulties presented during the sexual act, such as: reduction of vaginal lubrication, dyspareunia and decreased pleasure. The following statements corroborate with the authors cited above.:

"Look, it's changed a lot. So when we are young, we have a greater disposition to sex, and after we have reached a certain age [...] it diminishes our will [...], I do not feel much pleasure, I think my sex life decreased considerably, even in the 40 years I was much more lively, but from there it was already decreasing and after the 50 years decreased even more" Lily.

"[...] we no longer have that desire when we are younger [...] the sting is already low [...]" Orchid.

"[...] My vagina gets dry, dry, I do not feel like having sex anymore [...]" Hydrangea.

Sexuality encompasses more than the physical ability to have sexual intercourse, involves internal aspects that include the estrogen reduction, making the epithelium of the genital tract thinner and fragile, providing vaginal dryness and narrowing with diminished roughness and elasticity. Decreased vaginal lubrication can cause pain during sexual intercourse that will affect their marital relationship, and the gradual decrease of

hormones leads to reduced libido and favors disinterest and decreased sexual activity⁽¹²⁻¹³⁾.

Although half of the women mention the decrease in sexual desire, others experience their sexuality fully during this period. This phase for some women promotes the increase of the libido that along with the maturity of the moment contribute to their exercising their sexuality with more freedom, with a moment more focused on the pleasure of the couple and not only on the conjugate satisfaction, as the reports show:

"[...] I feel a lot of desire, every day If my boyfriend looks for me, there is [...], when there is a person on my side that I like and he likes me, I feel better and better [...]" Violet.

"[...] I love to have sex [...], for me, the best phase of my sex life was 40 years so far [...]" Chrysanthemum.

"This is a phase of life that we are more mature, you have a more differentiated sex, it is not that wild sex of teenage passion. Today you live the love [...], today you live in harmony [...], today I am prepared psychologically better [...], the children are already raised, I have a better living condition [...]. Today I have more time for sex, more time for love, more time for that fellowship" Azalea.

"[...] in the reproductive phase you are afraid of getting pregnant, you stay in that insecurity and after that, you know that you will not get pregnant [...], so you have more freedom [...]" Acacia.

"[...] when you are in the active life, you have every day, you want, only that after a certain age decreases the amount of times, but already increases the quality, the person gets more experience, then has more quality [...], at this stage is better so it is not so many times, but the few they have are with quality, it satisfies" Acacia.

The climacteric period can be lived in a positive, healthy and with self-esteem way. Aging and its consequences cannot be avoided, however, they can happen in a calm and healthy way, provided that the women in the climacteric phase

are aware and prepared for the transformations that they will suffer, visualizing sexuality as affective relations that provide a quality of active life⁽¹⁰⁻¹²⁻¹⁴⁾.

This period also happens in parallel with the time when the children are raised and leaving home, thus, contributing to the couple having greater sexual freedom. In addition, the impertinence of menstruation and concern for pregnancy no longer exist, making this experience even more peaceful⁽¹⁵⁾.

Factors that interfere in sexuality

Esta categoria demonstrou os principais fatores que interferiram no exercício da sexualidade das mulheres durante esse período. Surgindo assim, duas subcategorias denominadas, Climatério levou embora a minha juventude e o Relacionamento do casal.

A subcategoria Climatério levou embora a minha juventude, evidenciou que algumas mulheres sentiram muito a perda da beleza e o vigor da juventude.

"[...] I look myself in the mirror and everything I do in me does not help [...], I want to be, I get dressed, but you see that you no longer have that look that you had before, that youth, that strength [...]" Rosemary.

"[...] I've been very pretty, well adjusted, I look at me sometimes and I say, my God, how I feel with ugly skin [...] as if I'm unfastened [...]" Lily.

In contemporary Western society, there is an imperative of a beauty model based on an image built and shaped over time by a lean woman with specific characteristics. In the climacteric period occurs the distance of this beauty model, and this contributes to the women become dissatisfied with their own image⁽¹⁶⁾.

Therefore, it is essential that the woman at this stage considers her body beautiful and desirable, although she does not have the stereotyped physical pattern and seeks to strengthen her body self-image. For this reflects in the quest for self-love, demonstrating femininity and maturity⁽¹⁷⁾.

In the Couple's relationship subcategory, most of the interviewed women stated that they have a good relationship, having complicity, dialogue and understanding on the part of the partner.

"[...] the relationship with my husband is very quiet, we come from a maturation, there is complicity, companionship, love, we know how to respect the coexistence of one and the other. The problems that affect me, I have very serious health problem, I do chemo he knows how to understand it. On the other hand, he has coronary problem so I learn to deal with his disability [...]" Azalea.

It is evidenced in this report that both have respect and that they know how to understand the difficulties that the other presents. In this way, the coexistence becomes more peaceful, since there is no charge, just a complicity that goes beyond the relationship in the day to day and that directly influences the exercise of their sexuality.

It is important that the partner also seeks to raise the self-esteem of his wife, as a companion, as this contributes to their being stimulated and valued, influencing in this way, positively not only in daily life, but also in the sexual act. By feeling more loved and safer, this will enable better conditions to develop sexual activities⁽¹⁵⁾.

"[...] he is a person who does not drop into the routine ... he already talks, it takes longer in orgasm, he already expects the partner, because he has the understanding of it there, it is not vup vup and it is over so he will wait if he will feel pleasure the partner also has to feel so has it all there. Has the conversation got the dialogue [...]" Acacia.

On the other hand, other women mentioned the lack of dialogue, affection and attention on the partner' side, according to the following statements:

"[...] I miss someone to talk, to tell stories ... the husband arrives from the farm does not tell anything, he does not talk at all, so I feel more rejected. Stay in that routine life, you feel rejected. [...]. He does not come like that, giving a hug, a kiss on me, does not count as that was, does not sit to

talk ..., at this age I want more affection, I want to talk. I want to feel loved not rejected [...]" Rosemary.

"My husband is not affectionate, he does not have any affection, he goes fast vap and vupt and it's over, with that I feel very bad, I do not think that's right [...], at this age I want more affection from one to the other, and I feel that he does not have that affection and when I go caresses he does not accept, I think as he does not give, he also does not want to receive" Hydrangea.

This fact can be explained by the fact that the couple does not have an affection relationship, loyalty and companionship. In this way, the relationship exists without the approach of the couple, the man suddenly see his partner only in the need of the sexual act⁽¹⁸⁾.

Faced with this, a greater understanding, affection and conjugal dialogue is necessary. If the relationship before the climacteric period was no longer good, full of problems, the climacteric time can be a period of explosion or total bankruptcy. However, if the couple adopts the posture to face the problems and the limitations together, whether these physiological or psychological consequences of this transition, the difficulties can be overcome with more tranquility⁽¹⁹⁾.

Women value romanticism, affection, attention, understanding, dialogue, praise. And the way the partner perceives it will affect the experience of that moment⁽¹⁵⁾.

Perception of the woman about herself

In this category, most women reported feelings of self-satisfaction, it was said that there were changes in their lives, however, during that time they were able to make the changes an ally, learning to live with them with maturity and strength.

This data can be justified because this moment is a stage of human development and the woman has to accept the news that this stage offers⁽¹⁸⁾. In this way, the climacteric period is one of these life phases and knowing how to understand it is a way of accepting the changes that happen in this period, as follows::

"[...] we are going through transformations and have to accept it, it is the path of our life, we are born, grows, is changing We are like a metamorphosis, we see ourselves young, then it changes [...], you have to accept its transformation [...]" Orchid.

"[...] I see myself as a person more experienced in life, more lived. Today I know what I want, before I did not know what I wanted, I wanted so much and I did not have anything [...] at this stage you know what is good for you [...], today I do things with my foot on the ground, I do not blame others for my actions [...]" Rosemary.

It is fundamental that these women consider the climacteric period as an opportunity and possibility of realization and renewal, enjoying their experience and maturity. Women with self-confidence, emotional and affective stability, a positive image of themselves, in short, experience this moment with more security, tranquility and life quality. With this, the climacteric period promotes losses and gains that can generate crises, but also allows achievements and flexibility before the life⁽²⁰⁻²¹⁾.

Conclusion

The study revealed that the sexuality expressed in the climacteric phase brings with itself several transformations in the woman's body, characterizing those of a biological, cultural and psychological nature, being necessary a new personal and sexual remodeling during this stage.

From the deponents' discourses it can be seen that, unfortunately, society still reigns in the cultural pattern, which inserts the woman in the performance of self-imposed roles, aimed at the reproduction and satisfaction of the partner, in addition to the stereotyped image of the female youth, impregnated in the present day.

On the other hand, some women identified coping strategies through the climacteric phase, recognizing the changes that occurred, and processing them in a positive and optimistic way, accepting that biological transformations are part of the body and mind, as a process of constant evolution.

The guarantee of full sexual experience in all biological cycles is based on the sexual and reproductive rights of women, and the climacteric period and its implications must be constantly discussed and debated in the spaces of interaction in health, through the health team and the nurse, based on actions that demystify preconceptions, taboos, beliefs, gender issues, self-esteem and violence, difficulties that permeate the climacteric phase.

This study sought to make contributions to the scientific, academic and society as a whole, in the face of awareness and issues reflection that go back to the climacteric period, sparking through this work, new discussions and dilemmas faced by women, therefore, it is considered that there is no pretension to exhaust the subject in this research, but to serve as an aid to future research that ignites the theme, and helping others, especially the female audience, in the healthy expression of sexual life, rediscovering themselves integrally in their vicissitudes.

In this way, this research presents limitations, its results cannot be generalized, since they present peculiarities that involve the studied women in a regional context. However, it presents subsidies to think about the discussion of sexuality in the climacteric period more effectively, considering the needs, limitations and experiences lived in the climacteric period, since sexuality is a fundamental dimension of all stages of human life.

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