

Dementia and sexuality

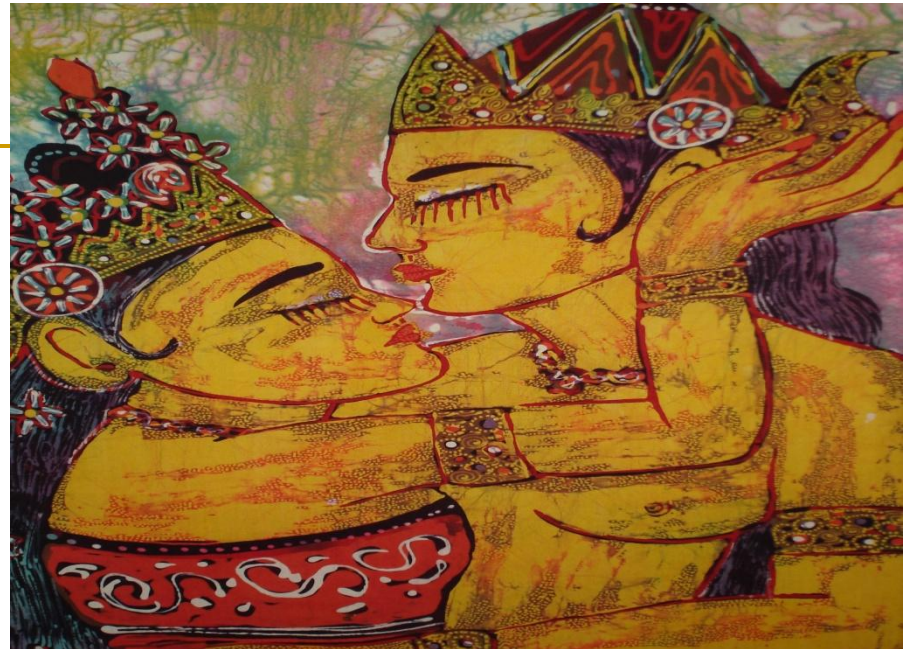
Sexuality, late life and Alzheimer's disease

Prague

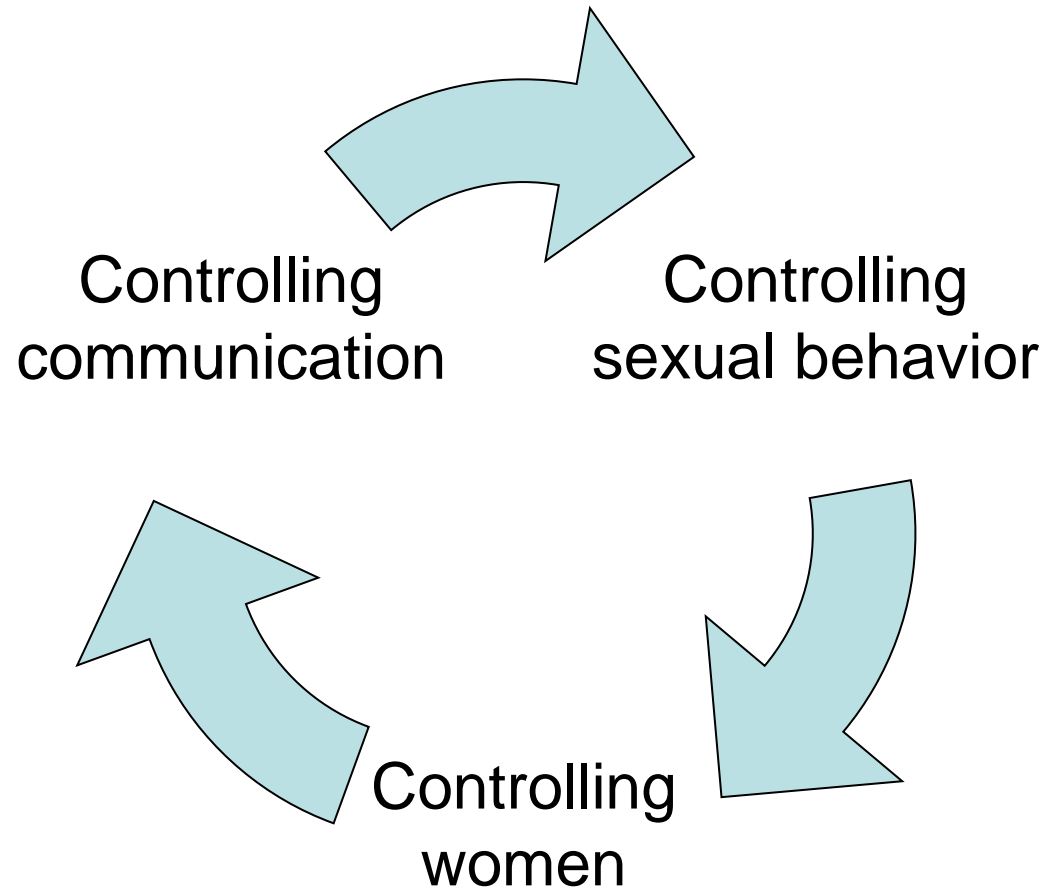
30 September 2011

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Galantin***

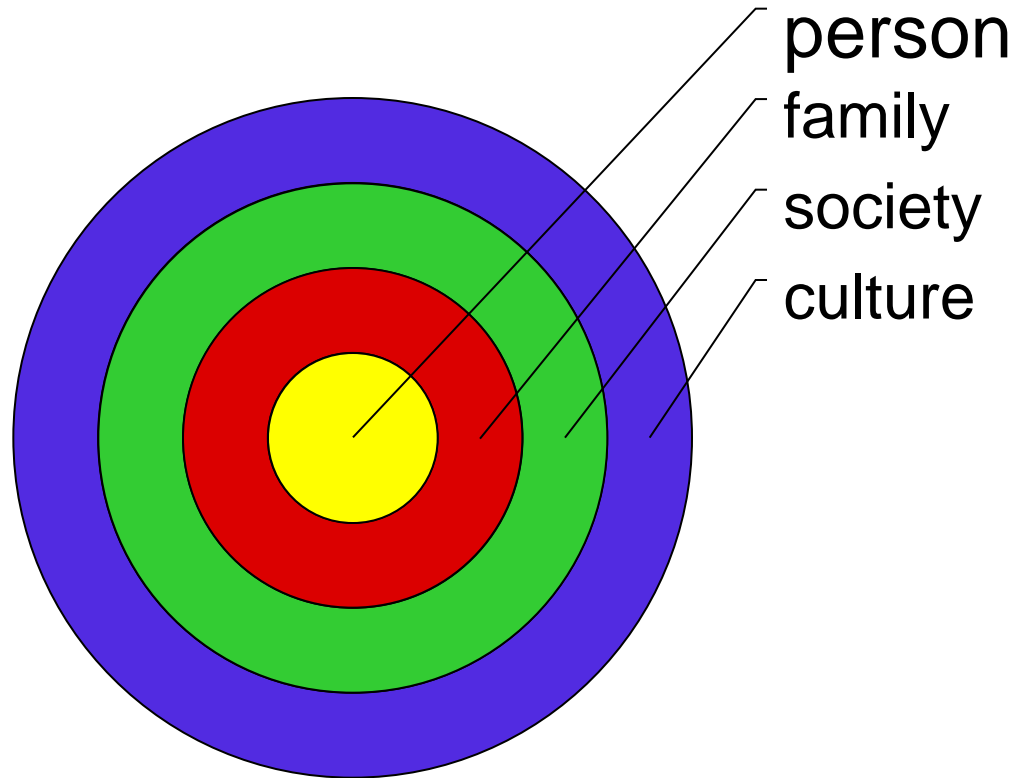
Psychotherapist



The role of sexual taboo is controlling society



Sexuality as deep dimension of Self Identity



...more complications around late life...

Myth from judaism (Noe's sons' syndrome)

Myths from Greek and Roman cultures

Life phylosophy during the Middle Ages

have produced until now

- general refusal about possible sexual life in ageing
 - deep shame for elderly people who practice sex
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Main issues of late life sex

- Physiological genital changes
 - Psychological situations
 - Correlations with subjective life path
 - State of health
 - Differences between men and women
 - Social and cultural values
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Some past research

- Annals of Internal Medicine 2700 subjects (75 – 95)
Desire and sexual activity → 50%
Coitus once in the past year → >30%
Too low coitus frequency → 40%
 - ASL Lazio - Italy (females, 70 average age)
Sexual activity → 56,6% (urban zone); 47,6% (rural zone)
Women without desire → 66% depressive attitude
 - J. McCary (76 – 92)
married → 48% sexual life
Women unmarried → 12% sexual life
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- Archives of Sexual Behaviour

(86 -102)

Attraction for opposite sex → 88% male e 71% female

Autoerotism practices → 71% m e 40% f

Coitus → 63% m e 30% f

- Ageing Society (3500 people)

No communication with familiar doctor regarding sex → 78%

Desire of more sexual contacts → 65%

Findings

The most important past research regarding sexual life in aged people demonstrates that

Desires

Coitus / autoerotism frequency

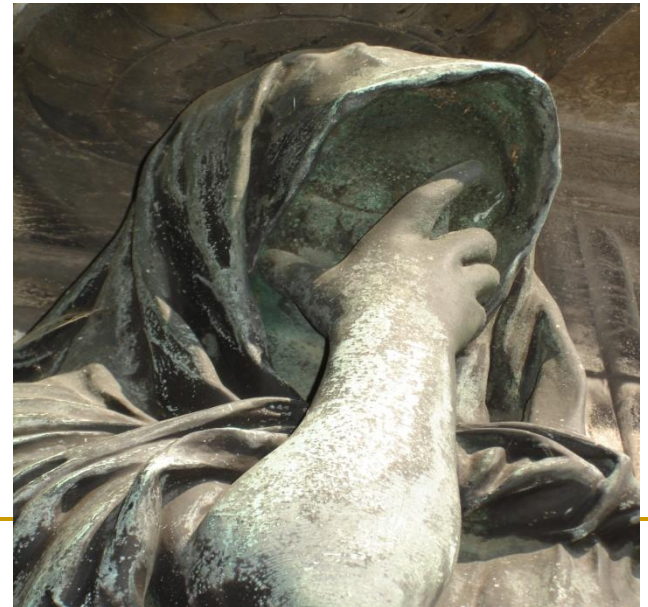
Level of shame speaking about sex

Differences men/ women

are similar to other age groups but...

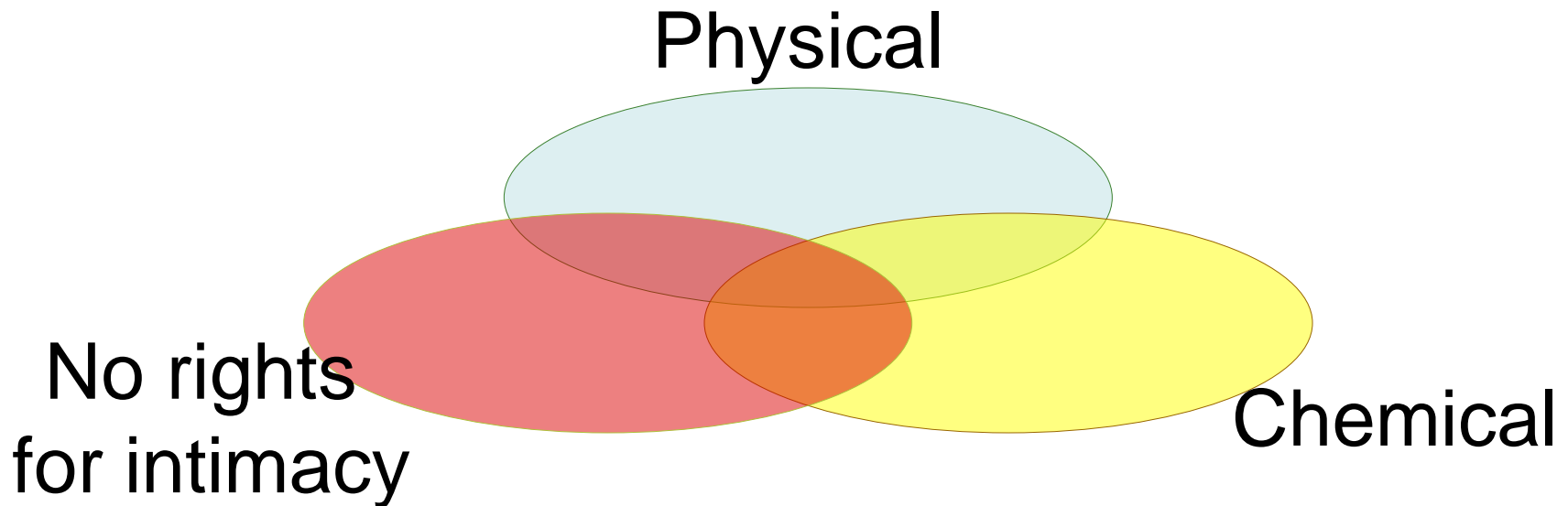
...where do they live?

Elderly people who live at home
can express their sexual behavior
very differently and
more freely
than
those who live
in a nursing home



Contention&contention&contention&...

There are three main forms of contention:



Our research:

Nursing home of Noventa Padovana – Padova (Italy)

Project

First step: what do aged people think about their sexual life inside a nursing home?

Second step: what is the care giver's experience about this?

Third step: what are the views of relatives?

This work is being conducted with the collaboration of
Dr. Sara Gipponi

Method

Subjects: 19 (4 male/ 15 female, 22% of residents)
chosen with MMSE > 23

Age: 62 - 99

Procedures: small group meeting (max 6 people),
twice of 90'

The aim was

- In the first meeting to speak about life sexual path
 - In the second to interview people about actual sexual life within the nursing home
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First step findings

Questions	no	maybe	yes
Lack of intimacy	63.2%	10.5%	26.3%
Possibility of privacy	68.4	10.5	21.1
Space for intimacy	73.7	15.8	10.5
Relatives agreeance	57.9	15.8	26.3
Difficulty in speaking	89.5	10.5	0
Intimacy for a couple	15.8	31.6	52.6

Notes: the above sample findings regard only Italian people...

Conclusions

It seems that the most important thing for the elderly people interviewed was the liberty of speaking about their sexual and affective experiences lived during their life

Each nursing home should be aware of actual needs of specific elderly people based on cultural and individual issues

It would then be possible to eliminate eventual intimacy contention only after the revelation of specific findings

Sexual life and Alzheimer's Disease

REPLACEMENT

PARADOXAL GRIEF

RESTITUTION

REPLACEMENT

The phenomenon
in which people are
not NOW and HERE

but

somewhere else and **in another time**

(...so in order to have contact with these people you
have to reach them where they are)

PARADOXAL GRIEF

When people have AD the main experience
for the relatives is that
the bodies of their loved ones are alive
but
they are dead in the relationship

(...so the relatives cannot grieve their loved ones yet at
the same time they are obliged to care for them)

RESTITUTION

If it is possible to reach people in their reality
(this is important not only for relatives but also for the care givers)
and elaborate on the paradoxal grief

AD can permit great restitution

in terms of

sense of life

and

completeness within relationships

(...this is the result of our research during 16 years of study and
work with AD people)

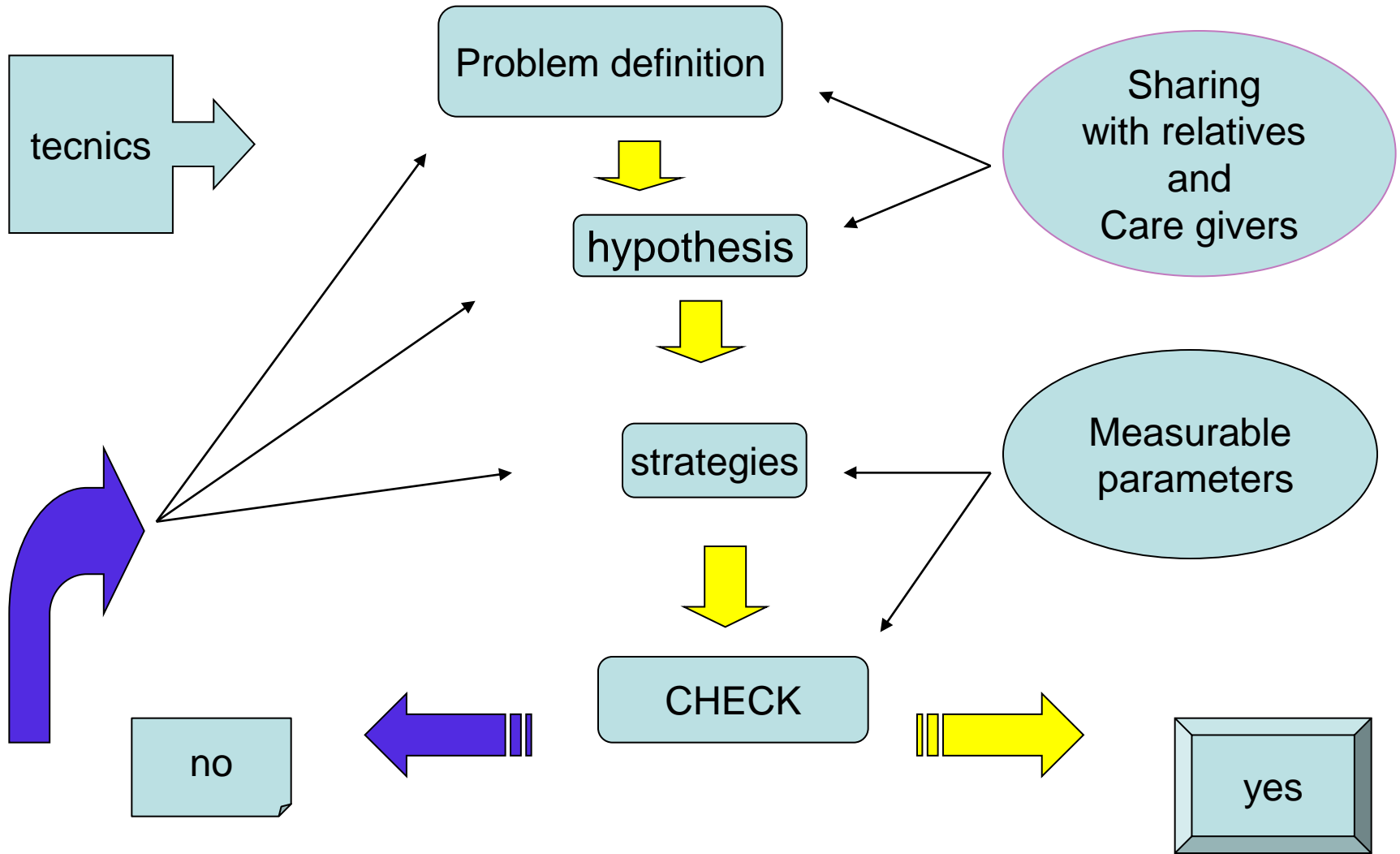
What's the problem?

The environment
around AD people
is the most important field of work
to treat
their sexual life problems

TECHNICS

- The first meeting with person and their relatives at home
 - Use of genogram
 - Elaborational meetings (for relatives and care givers)
 - Care givers' workshops
 - Symbolic technics
 - Behavioural observation cards
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INTERVENTION PROTOCOL



Last finding

“...having seen all that he has seen and having felt all that he has felt, he no longer denies the wonderful possibility of reality...”

A. Jodorowsky

