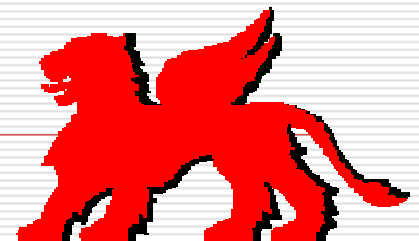

Sexuality, Fertility and Pregnancy with a Pouch

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What happens after pouch surgery?

- Many patients find that when they have had their surgery they have a better overall quality of life and health and this can help to improve their enjoyment of a full and active sex life. You do not have to focus on sexual intercourse to give and receive sexual pleasure.
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What effect could the operation have on my sexual relationships?

- There is large variation between patients and the effect of pouch surgery on sexual relationships. Some couples may find the surgery hardly makes any difference to their love life, others may find an improvement in their levels of desire and arousal.
 - Approximately 25% of women who have undergone pouch surgery may report some degree of pain or discomfort during intercourse at some point after their surgery. This problem is usually temporary but for some women pain during intercourse (dyspareunia) can continue after their surgery.
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What can be done to help if I experience discomfort during intercourse?

- ❑ Dyspareunia (pain during intercourse) does improve over time for many patients, but for those that continue to experience problems your hospital doctor or GP could refer you to a psychosexual therapist. There are also support organisations who you can talk to in confidentiality (listed at the end of this presentation).
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What other problems could I experience?

- ☐ Your enjoyment of a fulfilling sexual relationship may be altered in several ways following surgery.
 - ☐ You may be afraid that you will be incontinent during surgery, experience anxiety about how your partner will react or have negative feelings about yourself and your body image. If you are not currently in a sexual relationship you may suffer from anxiety about starting a new relationship with someone after undergoing your operation. This is very normal.
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- ❑ Patients have reported feeling many of these concerns before and after the pouch surgery, however many of them can be resolved through discussing these fears with your partner or a close friend. Or, you may want to discuss it in confidentiality to someone outside of your family and friends.
 - ❑ Your pouch nurse, stoma nurse, hospital doctors or GP is available.
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Do I have to tell my partner?

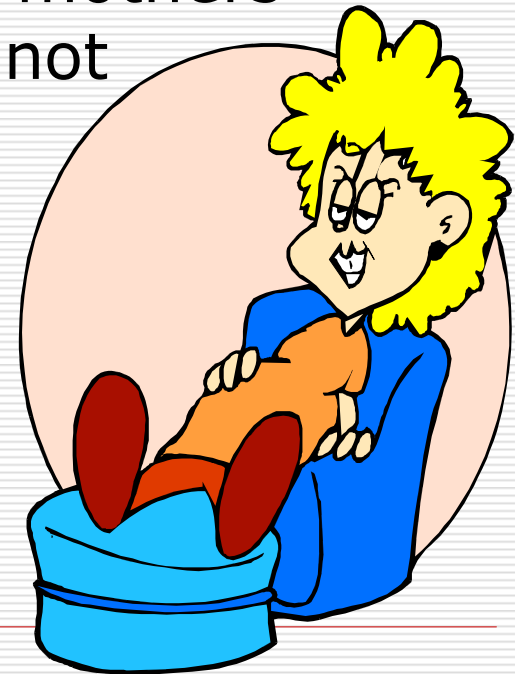
- ☐ If you are in a sexual relationship we would advise that you talk to your partner as open communication can often resolve the problems. You can be referred for counselling alone or with your partner.
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Thinking about a baby?



Can I use my medication?

- Most of the drugs used in UC are safe to be used through out the pregnancy. Some research states that hare lip and cleft palate are more common in infants born to mothers on steroids however the evidence is not compelling. Most doctors would still be wary of high dose steroids given to a pregnant mother.



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- None of the immunosuppressant drugs should be used and **methotrexate is absolutely contraindicated.** However azathioprine can be used with care.



The Facts

- ❑ The fertility of women with UC is probably normal and runs a relatively benign course during pregnancy, however this is halved in women who have had a pouch (Gorgun et al 2005).
 - ❑ A small percentage of patients (10-15%) have more problems and some actually present with UC for the first time during pregnancy.
 - ❑ Breast feeding is highly desirable but not essential.
 - ❑ Men may have problems with erections (impotent) following abdominal surgery and in times of relapses but are not infertile therefore still produce sperm. Production of sperm can be reduced in a young man having a redo or excision of a pouch.
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- ❑ The C-section is favored for the ileo-anal pouch patient as there is less stress on the sphincter and pelvic floor muscles and nerves.
 - ❑ Patients with a **Kock** pouch however favor a **vaginal** delivery.



Special thanks

- Mrs Julie Cornish,
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Contact the organisations

- ❑ **RELATE** offers psychosexual counselling through many of their local offices. Tel: 01788573241 (www.relate.org.uk)
 - ❑ **NACC (National Association of Crohn's and Colitis)** is an IBD support group. Tel: 0845 130 3344 (www.nacc.org.uk)
 - ❑ **Red Lion Support Group (registered charity)** for patients with ileo-anal pouches. Tel: 01702 552500 (www.redliongroup.org)
 - ❑ **Gay Ostomates Organisation** (www.gayostomates.org)
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