SESSION TRANSCRIPT · THE MISSING PIECES OF PERIMENOPAUSE

The Sex Talk Nobody Prepared Us For: Understanding Desire, Vaginal Dryness & Intimacy in Menopause

with Sheri Codd · Day 3, Wednesday, October 28 · The Difficult One

Let's talk about sex. And more specifically, let's talk about what happens when perimenopause decides to change things in the bedroom without asking. Maybe you've noticed your desire isn't what it used to be. Maybe intimacy has become uncomfortable. Or maybe you found yourself avoiding sex altogether because you're just not feeling it. And then there's the relationship side of things. Your partner might be wondering why you're not interested anymore. Heck, you might even be wondering the exact same thing. And suddenly, something that used to feel natural and enjoyable has become a source of frustration, guilt, or even resentment.

Does this sound familiar? Well, you're definitely not alone. I'm Sheri Codd, a certified menopause coach and women's sexual health and wellness educator. I've spent over 14 years helping women have conversations about their bodies, sexual health, and pleasure that they might not feel comfortable having anywhere else.

And one thing I've learned over these years is that women have a lot of questions about sex and their bodies, but we're not always given the information or the space to ask them. Especially when perimenopause enters the picture. So we are often warned about the common symptoms such as hot flashes, night sweats and mood swings. But what about vaginal dryness, painful sex, changes in desire, or the strain that these changes can put on our relationship? Those conversations don't happen nearly enough.

So we're going to have the sex talk nobody prepared us for. We're going to look at why desire changes, what's happening when intimacy becomes uncomfortable, and how to talk to your partner about these changes without feeling embarrassed or guilty. And most importantly, I want you to walk away knowing that menopause may change how you experience intimacy. But it doesn't mean you have to say goodbye to pleasure, connection, or a satisfying sex life.

Now let's start with something I hear from women all the time. Why don't I want sex anymore? Maybe you used to enjoy sex regularly, and now you'd rather curl up with a good book, watch Netflix, or, you know, just go to sleep. And honestly, after a long day of work, family responsibilities, hot flashes and everything else life throws at us, sometimes sleep does sound pretty darn sexy.

But here's what I want you to understand. Your sex drive isn't controlled by one hormone, and there's no single switch that menopause suddenly turns off. Yes, estrogen and testosterone can influence sexual

function, but desire is also affected by sleep, stress, medications, emotional connection, relationship dynamics, and whether sex actually feels good.

Think about it. If you're exhausted because you've been waking up at 3am, you're stressed about everything on your to-do list, and the last few times you had sex, it was uncomfortable or maybe even painful, how excited are you really going to feel about doing it again? Probably not very. And that doesn't automatically mean you've stopped loving your partner or that something is wrong with your relationship. It just means that there may be several things affecting your desire.

There are different ways we experience sexual desire. So some women experience what's called spontaneous desire. That's when you suddenly feel interested in sex without anything necessarily triggering it. Maybe this is what you experienced in your earlier years, and now it's suddenly gone.

But there's also something called responsive desire. That's when desire develops in response to pleasurable touch, affection, emotional connection, or other enjoyable experiences. In other words, you might not start out feeling particularly interested in sex, but as you begin connecting with your partner in a way that feels comfortable and enjoyable, desire may start to build.

Now I want to be clear. Responsive desire doesn't mean forcing yourself to have sex when you don't want it. It means understanding that desire doesn't always have to show up first. And sometimes what we really need isn't more pressure to have sex. It's less pressure, more connection, and a chance to enjoy intimacy without expectations.

And we also need to talk about stress. When you're constantly overwhelmed, your mind is racing, and your body feels like it's always on high alert, it can be difficult to relax enough to enjoy intimacy. Your nervous system is busy responding to everything else happening in your life. And while stress doesn't affect every woman the same way, for many women, it can make sexual desire feel like one more thing they just have no energy for.

And before you start blaming yourself for not being in the mood, I want you to ask a different question. Instead of "What's wrong with my sex drive?" try asking, "What might be affecting my desire right now?" Understanding what's getting in the way is the first step toward making meaningful changes.

And that brings us to another important piece of the puzzle. What happens when sex doesn't just feel unappealing, but actually starts to hurt? Vaginal dryness and painful sex don't get nearly enough attention when we discuss perimenopause. And before anyone gets uncomfortable, remember we're having the sex talk nobody prepared us for. So yes, we're going to be talking about vaginas.

So here's something that might surprise you. Vaginal dryness, burning, irritation, painful sex, and even changes in your bladder habits can all be connected to perimenopause. There's actually a name for this: genitourinary syndrome of menopause. I know it's quite a mouthful, so let's just say GSM for short.

So as estrogen levels decline, the tissue in and around the vagina and urinary tract can change. The vaginal tissues may become thinner, less elastic, and produce less natural lubrication. These changes

can make everyday activities uncomfortable and can make sex painful.

But GSM isn't just about sex. Sometimes women notice itching and burning. Others experience urinary urgency, frequent trips to the bathroom or recurring urinary tract infections.

And here's what I find particularly frustrating. So many women experience these symptoms without realizing they could be connected to perimenopause. They might assume it's just part of getting older, something they have to live with. And while it is common, that doesn't mean you have to accept being uncomfortable.

So what can you do about it? There are over-the- counter products such as vaginal or vulvar moisturizers. There are also medical treatment options, including local vaginal estrogen and other prescription therapies, depending on your individual health history. And for women experiencing pelvic floor dysfunction or discomfort, pain with penetration, or urinary urgency, pelvic floor physiotherapy may also be helpful.

When we are talking about vaginal moisturizers and lubricants. There is an important difference between the two. Think of a lubricant as something you can use during sexual activity to reduce friction and make things more comfortable. It's something you use in the moment. A vaginal moisturizer, on the other hand, is designed to be used regularly to help relieve ongoing dryness, even when you're not having sex. This is something you would benefit from using daily. They are different products with different purposes, and some women may benefit from both. The important thing to remember is that you have options. So if you're experiencing ongoing dryness, burning, painful sex, or urinary changes, bring these symptoms up with your healthcare provider. These symptoms can have different causes and getting properly assessed matters.

Something I'd like to stress: painful sex is not something you should have to push through. When sex becomes uncomfortable, it's understandable that your desire might decrease. Think about it. If something hurts every time you do it, you're probably not going to be particularly interested in doing it again. Sometimes women start avoiding intimacy because they're worried it's going to hurt. And their partners interpret that avoidance as rejection. And now we're dealing with both physical discomfort and emotional disconnection.

That's why understanding what's happening in your body is so important.

But there's another part of women's sexual wellness that I want to talk about, and it's something I've spent many years educating women on: vibrators. Yes, I said vibrators. And while most people think of vibrators as pleasure products, there is actually growing interest in how they may also support women's sexual wellness.

In fact, a small pilot study published in 2024 followed women using vibrators regularly over a three month period. Researchers observed improvement in sexual function and reductions in sexual pain, along with improvements in other pelvic health symptoms.

Vibrators can also be another way for women to explore what feels pleasurable, learn about their bodies, and experience stimulation without the pressure of penetrative sex. And for some women, that can be a valuable part of reconnecting with their sexuality. Of course, if you're experiencing pain or significant irritation, it is important to address that first, rather than trying to push through discomfort with a vibrator. Pleasure should never feel like an obligation, right?

And here's what I really want you to remember. Your sexual wellness matters whether you're in a relationship or not, whether you're sexually active or not, and whether your desire looks the same as it did ten years ago or it's completely different now. You deserve to understand your body, explore what feels good for you, and have access to information and support without embarrassment.

And that brings us to another piece of intimacy that can sometimes be even more challenging than the physical changes. I'm talking about talking with your partner.

So we've been talking about desire changes, why sex might become uncomfortable, and some of the things we can do to support our sexual wellness. But now comes another challenge. How do we actually talk to our partners about this? Let's face it: talking about vaginal dryness, painful sex, or why you're not interested in intimacy isn't always the easiest conversation to have. And sometimes we don't even understand what's happening ourselves. So how are we supposed to explain it to someone else?

But here's where things can actually even get more complicated. Maybe you've started avoiding sex because it's uncomfortable. Or maybe your desire just isn't there right now. Your partner might interpret that as rejection. They may start wondering, "Are you not attracted to me anymore? Did I do something wrong?" Meanwhile, you might be feeling frustrated, guilty, or pressured because you don't know how to explain what you're experiencing. And before you know it, neither of you is feeling particularly connected.

So this is where communication becomes so important. And I want to share three simple things that can help.

First, have the conversation outside of the bedroom. That's important. Don't wait until your partner initiates sex and you're suddenly, you know, trying to explain why you're not interested. Choose a time when you're both relaxed and can talk without expectation. You might say something like, "I've been noticing some changes in my body lately, and I'm trying to understand them myself. I want us to be able to talk about it because our connection is important to me."

Second, explain what's happening to your partner without blaming yourself. Instead of saying, "I just don't want sex anymore," you might try, "My body is changing. Sometimes intimacy feels different or uncomfortable. It doesn't mean I'm not attracted to you. I'm just trying to figure out what feels good for me now." This helps your partner understand that there may be physical and emotional factors involved. And remember, you don't need to have all the answers before starting the conversation.

Third, take the pressure off intercourse. Somewhere along the way, we've gotten the idea that intimacy always has to lead to sex. But intimacy can also mean cuddling, kissing, massaging, holding hands, or

simply spending time without distractions. And sometimes when we remove the expectation that every affectionate moment has to lead somewhere, it becomes easier to enjoy those moments again. You might tell your partner, "I want to feel close to you, but I'd really like us to explore ways of being intimate without feeling like it always has to lead to intercourse."

And here's something I want you to remember. Intimacy isn't just about what happens in the bedroom. It's about feeling safe, connected, respected and understood. And rebuilding that connection doesn't have to happen overnight. It might take some patience, a few awkward conversations, and a willingness from both partners to learn and adjust. But those conversations are worth having. And if you're finding it difficult to work through these changes together, getting support from a qualified relationship or sex therapist can also help. You don't have to figure out everything on your own. Perimenopause may change the way intimacy looks, but it doesn't have to take away the connection you share.

So as we wrap up here, I just want to leave you with three things to remember. First, changes in your desire don't mean something is wrong with you. Your hormones, stress levels, sleep, physical comfort, and emotional connection can all influence how you experience intimacy. And just because your desire looks different than it did ten years ago doesn't mean you can't enjoy a fulfilling sex life today.

Second, painful sex and vaginal discomfort are not things you simply have to accept. GSM is common, but there are options to help manage symptoms. Whether it's using the right products, exploring medical treatments, or working with a pelvic floor physiotherapist, you deserve to feel comfortable in your body. And please don't be embarrassed to bring these concerns up with your healthcare provider. Your vaginal health deserves just as much attention as any other part of your health.

And third, communication really does matter. Your partner may not understand everything you're experiencing, especially if you're still trying to figure it out yourself. But having those conversations, expressing your needs, finding new ways to connect can make a meaningful difference. And remember, intimacy doesn't always have to mean intercourse. Sometimes it's about slowing down, taking the pressure off, and discovering what connection and pleasure looks like for you.

Now, if there's one thing I hope you take away from our time together, it's this: Menopause is a transition, not the end of your sexuality. Your body may be changing, your needs may be changing, and the way you experience pleasure may be changing. And that's okay. You deserve information, support, and the freedom to explore what feels right for you in this chapter of your life. Sexual health is health, and pleasure doesn't have an age limit. Thank you for joining me for the sex talk nobody prepared us for. And remember, just because we're getting older doesn't mean we have to stop the fun.