



FEMALE SEXUAL DYSFUNCTION IN A DEVELOPING COUNTRY LIKE BANGLADESH.

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Female Sexual dysfunction in Developing Country like Bangladesh.

SUMMARY: -

Objective:-Female sexual dysfunction (FSD) is a moderate prevalent problem with a low reporting case throughout the world. To find out the prevalence and attitude of health seeking for female sexual dysfunction and to assess the change of attitude of taking health care for FSD compared with previous study which was done in 2006 and presents at Thailand in 2006 at 9th Asian Congress of Sexology, Bangkok, Thailand 1-4Nov 2006.Method:- 1000 married sexually active women were studied on 2006 and 524 women on April 2017to May 2017. Data were collected using interviewing questionnaire on several aspects of Female Sexual Dysfunction and reasons of seeking medical services. General and pelvic examination was done in all patients. Result:- It was observed that in 2006 only 2.8% women attending the medical centre for FSD problem. After 11 years in 2017 only 3.6% women seek medical advice for FSD. The difference is not significant. On enquiry it was revealed that 52% had one or more sexual problem, 47% women had decreased sexual desire, 05.2% women had anorgasmia, 05.2%women had difficulty with arousal, 78.9% women suffered from dyspareunia, 05.2% patient complained for dry vagina and 36% patient complained of burning sensation in vagina after having their sexual inter course in 2017. On the other hand in 2006 it was found that 45% women had one or more sexual problem, 20% women had decreased sexual desire, 03% women had anorgasmia, 05%women had difficulty with arousal, 12% women suffered from dyspareunia, 07% patient complained for dry vagina and 09% patient complained of burning sensation in vagina after having their sexual inter course. In this series in 2017 dysprunia, decrease libido and burning sensation in the vagina after coitus is significantly higher than the previous study. Conclusions:- Female sexual dysfunction is a moderately prevalent problem with a low reporting rate in Bangladesh. Since general practitioners, gynaecologists , examine female patients for evaluation of various types of pelvic dysfunction, certain groups of these women may have concomitant sexual dysfunction. Physicians who have good rapport with these patients are in a privileged position to help with these intimate problems which are often difficult for the patients to discuss.

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