The Psychosexual Impact of Vulval Disease – A Case Study

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Introduction

• Case Study
• Goals for treatment
• Formulation
• Interactive Systems Model
• Sensate Focus
• Questions?
Case study

*Anna is a 31 year old white heterosexual female. She has been with her husband *Jay (32) since she was 18.

Referral from Dermatology (previously seen at Claude Nicol) with Provoked Vestibulodynia, possible vulval eczema and intimacy issues. History of deep dyspareunia. Eczema treated and under control. History of candida.

Seen for a total of 18 sessions (7 of which Jay attended).

Initial Assessment: Presenting problem: dyspareunia began when she started Depo-provera at age 19. Stressful working and family life. For several years was not open with Jay about pain.

No pain at sexual debut (18) and partners prior to Jay. Able to use tampons.

Breast reduction (19) and labiaplasty (24).

Felt like a sibling relationship.

No penetrative sex. Little intimacy with each other. (mutual masturbation/oral sex). Jay had recently been treated for Lichen sclerosis of the penis so had also found sex painful.

* Names have been changed
Goals for Treatment

• Pain free penetrative sex.
• To feel good about sex again.
• To feel I'm not letting Jay down.

Hypotheses:
• VPS secondary and situational
• Negative Emotional state
• FSi/AD
• VCVP
Maintaining

Negative emotional state- Shame of body (not like other women), Guilt: “I'm letting Jay down”. “I cant let him know sex not painful with other men.”


Pre-Disposing

Strong and loving mother and m. grandparents. Estranged from father. Protective of mother with brothers. Strong sense of self esteem but undermined by early puberty and issues with body image leading to labiaplasty and breast reduction. Dominant in relationship with Jay

Precipitating

Felt start of VPS from hormone contraception. Felt out of control (iatrogenic and link with loss of control in childhood) Candida and eczema (Body letting her down). Jay's lichen sclerosis. Secondary and situational.
Interactive Systems Model

**Somatic**
- Loss of vasocongestion
- Loss of Arousal
- FSi/AD
- Loss of Lubrication
- Pain

**Thoughts**
- Sex will be painful
- I want to be like other women
- I want to feel close to Jay.
- I want it to be like it used to be, carefree and fun.

**Behaviour**
- Withdrawal of self
- Loss of penetrative sex from sexual repertoire
- Avoidance of intimacy

**Feelings**
- I feel like I’m letting Jay down
- I feel scared to keep trying
- I feel scared and frustrated.
- I feel guilty.
• Sensate Focus 1
• Sensate Focus additions
• Sensate Focus genitals and breast non-arousal
• Sensate Focus arousal
• Sensate Focus containment

Sensate Focus
Questions ?