Sex After Stroke

After a stroke, you and your partner may have questions about your sexual life. This handout answers some common questions about this topic. Your healthcare provider can also talk with you about any questions you have.

Do people resume sexual activity after a stroke?

Yes, many people do. Most people can be sexually active after a stroke. It can take some adjustments, patience, practice, and sometimes some practical help. But in most cases it’s possible to have a satisfying sexual life after a stroke.

Is it safe?

Yes, it’s safe. There is very little chance that another stroke will occur during sex. During sex, you breathe faster and have a faster heartbeat. This is normal and is not likely to cause a stroke. After a stroke, it’s also normal to fear that something else may go wrong with your body. It can take some time and effort to get beyond these feelings.

How do we begin (again)?

There’s no right way, but talking with your partner is a good first step. Your partner might not talk with you about this topic unless you bring it up. But a conversation can often relieve your concerns.

Make time to discuss sexuality with your partner. Talk about how the stroke has affected the way you or your partner view your body. Talk about your levels of desire. Talk about the changes in your lives after the stroke. Dealing with your emotions and questions together can help your sexual relationship.

Adjusting to changes

A stroke can cause changes that require adjustments during sex. These changes impact:

- **Sensation.** Your sense of touch may be affected, or you may be paralyzed on one side. Some areas of your body may be painful or sensitive when touched. Remind your partner to approach you from the non-paralyzed side. Take time together to see what feels good to you now.

- **Strength.** Some positions may not be possible if you don’t have strength on one side. For example, being on top may be difficult. Try new positions, such as lying side by side.

- **Energy and stamina.** The energy required for sex is about the same as climbing two flights of stairs. You may want to plan sexual intimacy for times when you’re less tired.

- **Communication.** If you’re dealing with aphasia (loss of speech), remember that the sense of touch is a powerful way to communicate. Touching can show warmth, caring, and desire, and strengthen your relationship.

- **Memory or behavior.** Sometimes a stroke can affect memory or concentration. These changes can affect your sexual life. If this is the case, your healthcare provider can refer you to a specialist who can help you work around these problems.
**Things that get in the way**

After a stroke, depression is common — and it can affect your sexual life. Depression can make you feel unattractive or keep you from being interested in sex.

The good news is that depression can be treated. Talk to your healthcare provider if you’ve had several of these symptoms for more than a few weeks:

- Feeling sad, hopeless, or irritable
- Feeling tired or having little energy
- A poor appetite or overeating
- Trouble sleeping — or sleeping too much
- Feeling you’re a failure or that you’ve let yourself or others down

**Some medications can reduce your sexual desire or cause impotence (not being able to get or keep an erection).** These include prescriptions for anxiety, high blood pressure, and depression. Sleeping pills and antihistamines can also interfere. Talk to your doctor if you feel a medication might be affecting your sexuality. Don’t stop a medication without talking to your doctor first.

**Things that can help**

Your healthcare provider may have suggestions. Your doctor or another member of your care team can answer questions or help you solve problems. Medications or other treatments may help.

**You may want to get creative.** It can help to experiment with sexual aids or with new ways of making each other feel good.

**Remember all the other ways to stay connected.** Of course, sex is only one part of a loving relationship. Sharing affection through touching and talking can take the pressure off and help you both feel more comfortable.

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**Other common questions and concerns**

“**I care for my wife’s physical needs every day. It can be hard to switch gears and be romantic.**”

Being a caretaker is a new role to play. If you start to feel like a parent instead of a partner, this role can interfere with sexual desire. To keep your relationship on more equal ground:

- Find someone to help with your partner's physical care. You deserve breaks — and you need them.
- Try to focus on laughter, playfulness, and the interests you share together.

“**My body seems so different. Am I still attractive?**”

After a stroke, you may wonder this, but there are good ways to build your confidence. Cleanliness, careful grooming, and attractive clothes can help you feel your best. Also, talk with your partner about how you see your body. In most relationships, attraction is based on love and communication — it goes deeper than the changes a stroke may bring.

“**What if I can’t physically perform?**”

Many factors can affect the desire or ability to have sex, including medications, depression, concern over appearance, medical issues, or psychological issues. If you’re affected by impotence or a lack of desire, talk with your doctor. Good solutions are available.