# Sex and ageing

**Dr Sarah White:** Dr Karina Severin from the Jean Hailes Clinics, you have a special interest in sexual health, so I'm really excited to have you here to be part of our Healthy Ageing podcast series.

**Dr Karina Severin:** Me too. I love talking about sex.

**Dr Sarah White:** Well there's a good start. Now, good sexual health is about being able to enjoy a regular and satisfying sex life, whether that's by yourself or with someone else. So tell me, why is it important to have good sexual health?

**Dr Karina Severin:** Well, sexual health is part of what makes us human, or sexual function is what makes us human. And we are one of those few species that do have sex for fun and not just for reproductive purposes. So it's really part of our being. But what makes a healthy sex life or a satisfying sex life can mean different things for different people. And that doesn't have to mean reproductive, that could be intimacy or connection or pleasure and fun. All of these things are part of it. And so that, as you say, could be with another person or it absolutely could be by yourself.

**Dr Sarah White:** And it does change, as you say, over the life course. At one point it's going to be about that reproduction, perhaps. At other times it'll mean different things to you entirely.

**Dr Karina Severin:** Definitely. And I think it would also depend a bit on what's your relationship status. So, are you someone who is meeting new people. Are you someone who was trying for pregnancy? Are you someone who's been with the same partner for a long time, but actually your sexual life is part of what keeps you together or part of what makes it special for you as a couple in your relationship. So it doesn't have to be the same thing between people, and it doesn't have to be the same thing at every point of your life as well. It's going to look different depending on where you're at.

**Dr Sarah White:** So is it normal for sex drive to go up and down throughout our life course?

**Dr Karina Severin:** It is absolutely normal for sex drive to go up and down. It is heavily influenced by things that are happening both on a physical level, or hormonal level, and also from a stage of life.

**Dr Sarah White:** All those stresses.

**Dr Karina Severin:** Stresses, children, jobs, menopause, you name it. All of these things can have an impact on people's sex life. Some people have a real spontaneous type of libido and sexual desire. This is the kind that you see in a movie, where you're in the throes of excitement and you see the person and next thing you know you're just—

**Dr Sarah White:** So I'm tipping this is something that happens more with new partners, perhaps? A little harder with people who've been around a while?

**Dr Karina Severin:** Exactly. So I was going to say that the thing about this is, this is often the type of typical type of desire that's presented in—

**Dr Sarah White:** In movies, but not real life?

**Dr Karina Severin:** But it's not often the way that this really turns out in real life. And if you are the sort of person that has that kind of spontaneous sexual desire, well that, all power to you, and I think that's amazing—

**Dr Sarah White:** But you shouldn't expect it perhaps.

**Dr Karina Severin:** But I think if that's not the way that you tick, and particularly as you get older, please don't feel bad about that, because this is very normal for it to not quite work that way in real life. I think what's a more common type of desire is what they call a 'responsive desire'. And that's the kind where you might not be thinking about it, it's not really on your mind, but you know that if you set the scene and you get the ball rolling that, as things go along, you know you'll probably enjoy it and you'll have a good time and you'll get there in the end.

**Dr Sarah White:** And this is also really normal. And is that a bit about being receptive and responsive to someone else's overtures?

**Dr Karina Severin:** Exactly. Exactly. So sometimes that's a case of, so we are seeing this a lot when I'm speaking to women in the clinic and they sort of say, 'Well, I'm not really thinking about it, but actually once we get going, it's actually pretty fun and I have a good time.' But I think sometimes there's this perception that that's not the right kind, because not your typical 'movie moment' kind of style. But it's really normal, it's healthy and it's completely fine if that's the way that you tick.

**Dr Sarah White:** And although we're Jean Hailes for Women's Health, we do hear that about the men as well. They don't always have the same sex drive.

**Dr Karina Severin:** Absolutely right. And I think one of the things that can happen to, particularly if you are in a long-term partnership, that what can happen over time is that people's level of sexual desire, or their type of sexual desire, doesn't match the other partner's. And I think that a lot of the time when I'm speaking to people who are having issues around sex at any point in their life, it doesn't have to be older people, it's often actually that they in themselves feel fine, but the issue is that it doesn't match their partner's. And how do you negotiate that space together? And this is particularly something that people can struggle with. If one person has a very high level, they have that spontaneous desire, and they want the other person to have it that way, and that's not quite the way that they tick, so how do you negotiate that?

**Dr Sarah White:** So it sounds like communication around those needs, those desires, those concerns is really important.

**Dr Karina Severin:** It is really important. And I think that not only is it important, but also acknowledging that we're all different and you're still normal, you're still normal. I think there are some people that find, though, that they do get to this point in time where, look, they're really not interested at all. And that's even if the scene is set and the conditions are right, they still can't get into it. And this is also really common as people get older, for this to happen. And this can be for all sorts of reasons, and this might be the sort of thing where you really have to nut out as an individual, or perhaps with your GP, or someone to help you, or a sexual therapist perhaps, to kind of get to the bottom of why that might be, if you really feel like there's nothing.

And some sexual therapists talk about the difference between accelerators and brakes. So there are some things that accelerate libido and desire, things that make you actively interested. And then there are a whole lot of brakes, which are things that are putting you off. And so sometimes it's a case for you as an individual to have a think about, well, what are the factors for you that are making this a zero interest zone? Is this because you've got a lot of life stresses? Is it because of relationship issues? Is it because of physical health? Is it because of other illnesses?

**Dr Sarah White:** So it's understanding the individual circumstances and then addressing them.

**Dr Karina Severin:** Exactly.

**Dr Sarah White:** So going to one point that I know does affect women, particularly as we get older, let's talk about lubricant, or lube. Tell us why it can be so handy in the bedroom.

**Dr Karina Severin:** Oh, absolutely. So I think this is a really common thing that I see in the clinic, because when a woman, so we're talking about lubricant for women particularly, but obviously for both partners in this situation, but what's really common for women after menopause is to really experience vaginal dryness. And this is a physiological thing that happens as your oestrogen levels start to fall with age. What oestrogen does in the vagina is stimulates collagen production and elasticity, stretch and lubrication. And so what can happen over time, particularly the further you go post-menopause, is that the vagina walls lose some of their stretch, they lose some of their elasticity, they lose some of their lubrication, and it just becomes sore. It just becomes sore. And then if you go to have sex, it can be really sore.

**Dr Sarah White:** So that's penetrative sex, but even if it's non-penetrative sex, lube can still add to the experience.

**Dr Karina Severin:** Absolutely. So I think it doesn't even have to be in sexual activity to be dry and sore. So this is a common thing. So I think one of the most basic things that couples can do is to use good lubricant.

**Dr Sarah White:** What does 'good lubricant' mean?

**Dr Karina Severin:** Yeah. So, I mean, there's all sorts of types, and there are different types of lubricant for different purposes. So your typical water-based—

**Dr Sarah White:** That's new for me, I thought it was just there's one and done, no?

**Dr Karina Severin:** So the thing is that a lot of lubricant that's sold just off the shelf at the supermarket, for example, is really designed for people to use with condoms, water-based lubricants, because that doesn't cause condoms to split or to break. But the water-based lubricant is not quite as good for actual lubrication, because it evaporates and it dries and sometimes leaves sort of a sticky residue, which is not very nice. So if you are having penetrated sex or even just foreplay contact and wanting to use a lubricant, but you're not needing to use condoms, we would recommend that people use either an oil- or a silicon-based lubricant, because these tend to have more staying power and not evaporate and dry. And so they go the distance, so to speak.

**Dr Sarah White:** And they're not irritating? Because we do have a lot of women come to the Jean Hails clinics because of vulval irritation. These lubricants are fine for non-irritation?

**Dr Karina Severin:** I think if you buy one that's from a reputable company, that is designed for this, then they're good. But sometimes even just oils such as almond or olive can do the job as well.

**Dr Sarah White:** Right. So raid the pantry if really in need.

**Dr Karina Severin:** Exactly. As long as it's something that can be a bit more messy.

**Dr Sarah White:** Right. That sounds like it might be very messy.

**Dr Karina Severin:** But you can work around that.

**Dr Sarah White:** Oh, well, it might help with that spontaneous desire, right?

**Dr Karina Severin:** I think the other thing to say is that if, some people that's not enough, and some people do require, it is possible if, according to your circumstances, to speak to your GP about using some vaginal oestrogen cream or there are some other prescription medications that can help if that's not enough and if that's something that you would like.

**Dr Sarah White:** So let me come back to condoms, because we actually do know that sexually transmitted infections are increasing pretty rapidly in older women. Now, why is this, and what's your advice for women who are perhaps re-entering the dating scene? Because I presume that's what it's about.

**Dr Karina Severin:** We are speaking to many people now who perhaps might have been in a very long-term relationship that's ended, and after a period of time they're getting back and they might be starting to see new people again, which I, for one think is amazing.

**Dr Sarah White:** Oh, totally.

**Dr Karina Severin:** When you are in your reproductive years, there's an incentive to use condoms, like to prevent pregnancy. And one of the things that you're liberated from after menopause or after your reproductive years is that you don't have to worry about that anymore, particularly if you're with a new partner or a casual partner. And so there's less incentive to use condoms, because you're not thinking about that as your driver or your motivation. I think the other thing is that sometimes people may have come from backgrounds or in the past where they've never really addressed or taught, STIs or sexually transmitted infections weren't something that were talked about. People may not have had good sex ed, or there might even be a misconception about what STIs are common and how they present. The thing is that most sexually transmitted infections don't really have obvious symptoms. And so there could be a misconception that because you can't see something or because the other person says that they're fine, that there's no risk there.

**Dr Sarah White:** It's going back to those safe sex principles, if you are starting with a new partner, around using a condom, testing. And then when would a woman come in to see you if she had concerns about an STI? If you say there's not many symptoms. Because I know we're seeing them in the clinic, why are they coming?

**Dr Karina Severin:** For sure. So I think that, for women particularly, a lot of STIs present with vague symptoms that are not particularly obvious, and it might present as sort of itching or sores or perhaps a change in discharge or a change in smell. And that might be when we pick them up. I mean, the other thing is that people may not realise how easy it is to just do screening, because if you are someone that doesn't have symptoms, which is the majority of people who, the majority of STIs, we don't even need to do an examination to do a test. So I really want to just stress that it is very easy, very non-invasive to, either a self-collected swab or a simple urine test, plus or minus some blood test, to do a full STI screen.

And this is something that, say for example, if you were going to be having some pathology taken anyway, you're having your cholesterol checked, you could mention to your GP, 'Oh, I've seen a partner and I would just like to be on the safe side. Can I do my sexual health screening?' And please don't be embarrassed to bring this up, because I for one would be really thrilled for you that this is the situation that you're in, and the fact that you were thinking about your health, it's so easy.

**Dr Sarah White:** And do you think that there are some women who are a little bit reluctant to talk about their sexual health with their GPs? I mean, you have an interest in sexual health, so you're perhaps not the ordinary everyday GP, but generally, GPs, it's just part of the job, right?

**Dr Karina Severin:** It is very much part of the job. And I think it can be difficult if, say, it's your same GP who you've seen for the past 40 years and they feel like a family friend, maybe that might not be comfortable.

**Dr Sarah White:** Well, or if you're in a small country town or a regional area as well, you may not want to talk about being in a new relationship. So is there anywhere that women who are faced with that, I hope my mother doesn't mind, but she often talked about, she played tennis with her GP, so she didn't want to disclose everything to a tennis partner, what's your advice?

**Dr Karina Severin:** Look, there are up and coming more sexual health clinics that are in communities, where even nurse-run clinics where, because if you don't have symptoms, you could bring it up when you're having a cervical screening, you could sometimes do it that way. So there are other clinics that you can go to, or even telehealth potentially. There are some telehealth services that can do STI screening.

**Dr Sarah White:** Or at least let you know where to go.

**Dr Karina Severin:** Or at least let you know where to go. Exactly. Or could point you in the right direction or could help you to find a place locally that you could do the screening.

**Dr Sarah White:** Fantastic, that's really helpful. Thank you. So let's sum up by asking you what are the three things you want older women to know about sex?

**Dr Karina Severin:** Firstly, I would just like to tell people that you are normal. Whatever it is, the way that you feel is on the spectrum of normal.

**Dr Sarah White:** There's no such thing as normal.

**Dr Karina Severin:** There is no such thing as normal. It's all okay. If you are someone who has got the sexual desire like in the movies, that's amazing. If you're someone who's a bit slow to warm up and you just need, everything needs to be right, but you'll get there in the end, that's normal.

**Dr Sarah White:** That's totally fine.

**Dr Karina Severin:** A lot of couples, not even couples, but a lot of people at this point, they find, if you think back to the question of why do people have a sexual life, sometimes people at this stage of life get those things from other aspects. So you might get your intimacy just from connection with your partner. You might get physical activity by doing yoga and Pilates, you might have other ways to fulfill those needs and maybe you don't need this anymore. And that's also normal. It's also normal. So don't feel judged if you are not the way that somebody else is.

**Dr Sarah White:** Or that you think you should be. Okay. So number one is definitely, there is no such thing as normal. Whatever is right for you is just right. Okay. What about number two?

**Dr Karina Severin:** It can be really difficult at this point in time to negotiate with a partner if you are not on the same page about what you want. This can be really tricky. And the key, really, is finding a compromise. What is it that you want from this and how can you achieve that in a way that's not telling the high libido person that they can't have sex anymore. And it's, but on the other hand, it's not forcing someone who doesn't want to, either.

**Dr Sarah White:** Yeah, I mean no one should feel pressured, right?

**Dr Karina Severin:** This is the thing is that unfortunately we know that there are some people who do still get pressured into this. And it doesn't matter if you've known someone for 30 minutes or 30 years, that doesn't make that okay. But it can be very difficult to kind of negotiate that. I think that something that can be really tricky for people who've kind of always done things the same way for a long time, that when things change, sometimes you have to redefine what sex means for you. And it doesn't have to involve penetration, particularly if that's painful. Or for example, even for men, sometimes they start to have issues with erectile dysfunction or unable to orgasm. And sometimes for men that can be really crushing because that's sort of way that sex is defined.

But that's up to you as a couple or as an individual to find another way, be creative and explore the way that you want to manage this. So do things differently and try things out. And you're never too old to try something new and different. So that would be my next thing. But I think that if you are someone who is, but it's not okay to be forced is the other thing. I think that there's a fine line between kind of negotiating and—

**Dr Sarah White:** Sometimes a little compromise.

**Dr Karina Severin:** I'll do this for you if you do this for me, but it's never okay to be forced if that's not what you want.

**Dr Sarah White:** Sure. So number three out of your top tips?

**Dr Karina Severin:** So the next thing is that bodies get older and they change.

**Dr Sarah White:** I have noticed this, Karina, myself.

**Dr Karina Severin:** They do. So things are going to change, and sometimes you do need to start to work around other physical complaints or issues that can arise as people get older. And I think this also does come back to a bit of creativity and exploration.

**Dr Sarah White:** So are we talking about a dodgy back here, or are we talking about our body image?

**Dr Karina Severin:** Both, I would say. So sometimes, for example, you're right, you've got your hips, you've had a hip replacement and you can't put the leg in the same position that you used to be able to do. So sometimes people have to get creative with pillows or aids, and there are all sorts of things you can experiment with, play around with, to get that right. So sometimes that might be a case of looking at, a lot of medications can have an effect on people's libido or their sexual drive and, for example, antidepressants and some cardiovascular medications and things, diabetes, all of these things can have an effect on people's sexual function. And I think that, please don't be scared to bring this up with your doctor if you feel this is a thing, because there are often other options or they might be, if you don't bring it up, then we don't know.

**Dr Sarah White:** If there's someone who is having problems with their sexual function, problems that are worrying her, what could she do about it?

**Dr Karina Severin:** So if you come and speak to your GP or if not your GP, if you're not comfortable, with someone like us—

**Dr Sarah White:** 'Us' being Jean Hailes, or a specialist women's health clinic.

**Dr Karina Severin:** A women's, a GP or a doctor with a special interest in women's health or sexual health. So that could be a sexual health clinic, it could be a reproductive hub, it could be a GP, depending on where you are. We would delve a little bit deeper I guess, into what your particular issues are and if there's something we can do about it. And that could encompass all sorts of things, from your over-the-counter lubricants, moisturisers. And there are all sorts of interesting things coming out that are quite useful to know about. Or is this something where we need to do an examination to make sure that there's not an underlying medical issue. Because for example, some women can develop skin conditions of the vulva that they might not realise could be treated. Or it could be a simple issue of providing some local oestrogen replacement to kind of rejuvenate the tissues a little bit, which for most people is quite safe to use at any age.

**Dr Sarah White:** That's the vaginal oestrogen.

**Dr Karina Severin:** That's your vaginal oestrogen, which is different to your more generalised menopause hormone therapy that someone might be using.

**Dr Sarah White:** Like patches and gels, because that's different. Right, okay.

**Dr Karina Severin:** Exactly. So it's different to that. And I sometimes liken it to the difference between taking a steroid tablet but using a steroid cream. Although they're the same thing, they're not the same thing in terms of—

**Dr Sarah White:** The method of delivery is very different.

**Dr Karina Severin:** Exactly. So some people have a really good response to that. If this is an issue more around libido and desire, sometimes we might look in to see, are there things that, medications that are you're on that might be affecting that and can they be changed? And for some women there may be a role of something like testosterone, but obviously that is individualised and probably you would need to speak to a sexual health doctor or GP about that.

**Dr Sarah White:** Now let me come to that body image question again.

**Dr Karina Severin:** This is very important.

**Dr Sarah White:** Because we see so many really unrealistic portrayals. You've touched on sex, it's supposed to be spontaneous and you're ripping your clothes off and it happens at the drop of a hat. But at the same time, we also have these visions of what we looked like when we were 19 versus what we look like when we're 69. Do you see women who are really, that's the brake, that's the barrier to enjoying sex is, just things don't, they're not in the same place that they used to be?

**Dr Karina Severin:** Unfortunately, yes. I do see people who say this and it sort of makes you really disappointed in a way. I think it's great to be getting older and wiser and changing, but you can't expect that your body's going to be the same, I think, as it was when you were 20 or 30 or 40. Things are going to change and they're going to be in, things in different places that they weren't before. Weight gain is extremely common. Almost everybody is gaining weight with age. It's just a part of the world that we live in. And the thing is that chances are your partner is too.

**Dr Sarah White:** Yeah, we never talk enough about the dad bod, do we? It's always the pressure on the woman.

**Dr Karina Severin:** And if you really think about it, they're doing this to be with you, and—

**Dr Sarah White:** Self-love might not just be physical when we're talking about a good, healthy sex life. It might also be about how we view ourselves.

**Dr Karina Severin:** Absolutely. Absolutely. And you think, this person wants to be with you for who you are, and it's not about looking like you're on the cover of a magazine. Who cares about that? That's not normal life. This is normal life. With someone that you enjoy spending time with and yeah, you got to let that go.

**Dr Sarah White:** I think that's very wise words to finish on. Dr Karina Severin, thank you so much for being part of our Healthy Ageing podcast series.

**Dr Karina Severin:** Pleasure.

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**Information about Jean Hailes for Women’s Health**

Jean Hailes for Women's Health is a national not-for-profit organisation dedicated to improving the health of all women, girls and gender-diverse people. For free, evidence-based and easy-to-understand health information, visit [www.jeanhailes.org.au](http://www.jeanhailes.org.au).

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