For many couples, maintaining intimacy throughout their relationship requires open lines of communication and engagement. When one member of a couple has Parkinson’s disease (PD), there are additional hurdles with unanticipated changes in the couple’s physical, emotional, and sexual interactions. Through broadening their view of intimacy and utilizing health care professionals, couples can maintain and even improve their intimate connection, even while living with PD.

How PD Can Affect Intimacy and Sexuality

The changes brought about by PD can affect a couple’s relationship, and it is important to understand the scope of those changes in order to maintain your connection as a couple while living with PD.

The motor symptoms of PD—slowed movements, tremor, and stiffness—can interfere with lovemaking, and reduced facial expression can make nonverbal communication difficult. Men may have difficulty achieving or maintaining an erection, or achieving orgasm, while women may have vaginal dryness or pain, and orgasm may be difficult as well. Medication side effects may reduce desire.

Beyond these physical effects, when one partner takes on the role of care partner, it can affect the ability of both partners to retain their sexual desire. One or both partners may be more tired, and may experience depression or grief as a result of the illness or contemplating an altered future. All of these increase the difficulty of keeping alive an open, intimate sexual relationship.

Communication is the Key to A Fulfilling Intimate Relationship

Good communication is the most important skill for any relationship, and even more so when living with PD. Many couples often have never needed to develop the skill of talking openly about their sexual relationship and their needs for emotional intimacy. Through developing this skill, couples will be better able to adapt to the changes PD brings, and other changes that happen sexually as we age. Sharing feelings, worries, and requests with your partner—being willing to be vulnerable, and being open to and supportive of your partner’s vulnerability—increases closeness, and makes it clear that you are committed to one another.

Key parts of successful communication with your partner include:

• Be positive: Rather than only telling your partner you are unhappy with your level of physical connection, try telling him or her, “Let’s talk about ways we can be more physically close.”
• Offer ideas, rather than blame or criticism, perhaps saying, “Can we try this?”
• Be brave! Embrace talking about the difficult topics; your partner will probably be grateful you brought them up, even if he or she is uncomfortable at first.
• Seek help from a professional if you need it.

Open Up to New Ideas of Sexual Intimacy and Pleasure

Perhaps the most important advice, beyond developing good communication skills, is to open yourself up to new ideas about what sexual intimacy entails and what can be pleasurable. When sex is thought of as a “buffet,” it can become full of interesting and nourishing possibilities beyond the standard fare you may have become used to. By expanding your definition of “sex”, and letting it evolve to fit you and your partner, you can remain intimate even as PD changes one partner’s physical abilities.

There are many different ways of being intimate. Focusing on pleasurable touch and emotional connection can make sex rewarding regardless of
any physical limitations. Find the activities you and your partner enjoy, which may be different from what you are used to.

There are some practical steps to take to help a couple cope with PD-related challenges and ensure they are connecting physically. Make physical intimacy a priority. Look for ways to have it, and adjust your routines to make it more likely. Establish a “bridging time” for yourself if you need it before sex, during which you relax, get in touch with your body, and connect with your own sexual energy. Time your medications to fit with your intended time for sex. Be in positions that are comfortable, and try new positions or use pillows for support. Be open to trying new things. Sex should be fun and meaningful, and with care and attention, it can continue to be despite the challenges of PD.

Get the Help You Need
Talk to your doctor about your sexual concerns. Your doctor may not bring up sexuality, but is likely to be able to offer you help in coping with PD-related challenges. You might try asking your doctor, “Can I talk to you about the changes in our sexual life, or my sexual experience?” or “What are the sexual side effects of the medications I am on?” Medications for Parkinson’s disease may affect sexuality, and some may cause hypersexuality; adjusting medications can often help. You may be experiencing depression, which reduces sexual desire. Depression should be treated for many reasons, including its effect on libido.

Finding a Therapist
A sex therapist or sexologist is trained in helping couples improve their sexual and intimate relationships. If there are no professionals in your area, use of technology such as Skype or Facetime may allow you to meet with someone in the comfort of your home. For more information, you can visit the following websites:

- American Association of Sexuality Educators, Counselors and Therapists
  www.aasect.org
- The American College of Sexologists International
  www.americancollegeofsexologists.org

Recommended Reading
- *Naked at Our Age: Talking Out Loud About Senior Sex* by Joan Price. 2011, Seal Press