



Sexuality and Chronic Kidney Disease

Many people think that sexuality refers only to the act of sexual intercourse. Sexuality includes many factors, such as how people feel about themselves, how they communicate with others and how willing they are to build a relationship. In addition, sexuality involves a wide range of pleasurable sexual activities that may or may not include intercourse, such as touching, hugging and kissing. Being a sexual person is healthy. Lovemaking may provide a way of feeling "normal" for

people who are chronically ill.

How can kidney disease affect sex life?

Kidney disease can cause physical and emotional changes that may affect your sex life. The chemical changes that occur in your body with kidney disease affect hormones, circulation, nerve function and energy level. These changes usually lower sexual interest and/or sexual ability.

Physical changes may cause people with kidney disease to feel less attractive sexually. Many of the medicines used to treat high blood pressure may affect sexual functioning.

Use of steroids may cause weight gain, acne, and unwanted hair growth or loss. Surgical scars can cause patients to feel unattractive. Medical changes and changes in self-image may affect sexual interest and functioning.

Is sexual intercourse safe for kidney patients?

Patients and their partners may worry that sexual activity could cause the patient's death or harm the dialysis access or transplanted kidney. No limitations need to be placed on kidney patients sexually. If sexual activity does not place pressure or tension on the access site, it will not cause damage. After receiving a transplant, it is important to wait until the scar has begun to heal. Once the doctor says it is all right to resume sexual activity, there is no reason to worry about damaging the transplanted kidney. Fear can cause people to avoid sexual activity needlessly.

For some couples, sexual intercourse is not possible. Some may feel that sex is not as important as it once was. Activities such as touching, hugging, and kissing provide feelings of warmth and closeness even if intercourse is not involved. Professional sex therapists can recommend alternative methods.

Will a child's sexual development be affected by kidney failure?

This depends on the child's age when kidney failure occurs. Young children with kidney disease are usually smaller than other children their age. They are also slower to develop sexually. Children who are on dialysis probably will have slower growth and sexual development than children who have kidney transplants. If a teenager has kidney disease, sexual development may slow down or even stop. For example, teenage girls may not have periods. Changes due to kidney failure and treatment may make the teenager feel different from his or her friends. Parents should express their concerns about growth and sexual development to the doctor. Parents of a child or teenager who is ill must fight the impulse to protect their child from the pain of growing up. Self-worth, independence, and sexual identity are important for teenagers. Parents need to talk openly with their children about physical, emotional, and sexual issues. Support groups for children and teenagers with kidney disease can be helpful. Contact a renal social worker or the National Kidney Foundation to find out if support groups are available near you.

Can you get AIDS from a transplant and risk giving AIDS to your sex partners?

Kidneys for transplantation and blood transfusions are now routinely tested for the AIDS virus. The risk of getting AIDS from a transplant or transfusion in the last few years is very small. Therefore, the risk of giving AIDS to a sex partner is small as a result of a transplant. Most health departments and health clinics can do a simple confidential blood test for HIV. Until the results of this test are known, use of a condom lowers the risk of passing the AIDS virus to a sex partner. Practicing safe sex is important for everyone.

Can a kidney transplant from someone of the opposite sex affect me sexually?

No. The sex of the kidney donor has no physical effect on the recipient's ability to function

sexually or on sexual preference (heterosexual, homosexual, or bisexual).

Do transplant patients have fewer sexual problems than dialysis patients?

Generally, transplant patients have fewer sexual problems than dialysis patients because they may have fewer physical problems that affect their sex life like fatigue or anemia. But, having a transplant does not make them less prone to sexual concerns. The level of interest in and ability to have sex varies with things like the quality of the relationship, age, stress level, and physical conditions.

Will sexual problems get worse the longer dialysis continues?

This depends on the person. Having kidney failure, like any other chronic diseases, means that the body is in a weaker overall state of health. However, as the body adjusts to the treatment, the kidney patient should feel better physically and emotionally, and interest in sex may return to its earlier level. It is important to be patient and allow time to get used to the kidney disease and treatment. Being flexible and having a positive attitude about yourself and about sex may lower the chances of having severe sexual problems.

Can you tell whether sexual problems are due to physical or emotional causes?

Yes. This requires a complete medical, psychological and sexual history of the patient and his/her partner. Medicines should be reviewed for sexual side effects and changed if possible. Blood tests should include hormone levels and blood sugar levels to check for diabetes. Men can be checked to see if nerve and blood supply to the penis are good and if they can have an erection. If no physical problem is found, an emotional cause must be considered.

What can be done if the problem is physical?

Several options are available for men whose penis will not get or stay hard (erection). Penile implant surgery places inflatable or semi-rigid rods into the penis. In some cases, surgery can improve blood flow to the penis. If the man does not want surgery, male hormones may be given. Oral and injectable medications can cause an erection. External suction devices can make the penis hard enough for intercourse, but they require time and hand strength. Doctors with special training in impotence can give information on all options as well as their advantages,

disadvantages, and side effects.

Women patients usually have less vaginal wetness and may have pain during sexual activity. Lower hormone levels can cause vaginal dryness. Use of a water-soluble vaginal lubricant can lower or stop pain associated with intercourse. Do not use petroleum jelly because it can increase the risk of infection. Some women may be unable to have a climax or may need more time to get "turned on" because of loss of energy, hormone changes, or medications for high blood pressure. A change in blood pressure medicine or extra hormones may be needed. Your doctor can provide information on options.

What can be done if the problem is psychological?

Feeling worried, anxious and depressed is normal when faced with a serious loss such as kidney failure. These emotions can cause loss of energy and lower interest in many activities including sex. If a sexual problem does occur, embarrassment and guilt often follow. Fear that the problem will happen again may cause the person to shy away from sexual situations. Relaxation exercises can help to control these fears. Regular physical exercise and activity help keep the mind busy and can improve physical condition and body image. If sexual problems continue, sex therapy can help. Even if the problem is psychological, some of the treatment options mentioned for physical problems may be helpful.

Can sex therapy help?

Sex therapy deals with the sexual problems of couples and individuals. The first step in sex therapy may be sexual education for the individual or couple. The therapist may assign activities to be done at home. These include communication exercises, stress reduction activities, and practicing ways of improving skills in giving and receiving enjoyable touches. Sex therapy can help with problems such as low sexual interest, trouble in reaching climax or reaching climax too soon, pain during sexual activity, and erection difficulties. Therapy also can help a person work through the effects of chronic illness on sexual functioning.

A sex therapist can be a psychiatrist, psychologist, physician, or social worker. Look for someone

who is licensed and who has advanced training and experience in sexuality and sexual problems. Charges vary and may be covered partly by insurance.

What can kidney patients do to help themselves?

Take an active role in learning about kidney disease and treatment. Follow the prescribed diet and fluid limits. Take all medications properly and tell the doctor of any side effects. Ask for an exercise program to help muscle tone, strength, and endurance. Your doctor and dietitian can suggest a weight gain or loss program, if needed. Lead a healthy lifestyle. Be aware of other things that could affect your sexual functioning, such as drinking too much alcohol and smoking.

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[Impotence](#)

Coping Effectively: A Guide for Patients and Families

Fitness After Kidney Failure: Building Strength Through Exercise

[Pregnancy and Kidney Disease](#)

[Staying Fit With Kidney Disease](#)

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If you would like more information, please call 1-800-622-9010 or write us at the National Kidney Foundation, 30 East 33rd Street, New York, NY 10016.

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