

Sexual Quality of Life after Bariatric Surgery

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Background

Half of all bariatric procedures are performed on women of reproductive age.¹

Studies have examined the impact of surgery on future pregnancies but less attention has been paid to female fertility and sexual function post surgery.

Methods

A prospective cohort study of women of reproductive age (18-45 years) undergoing bariatric surgery is ongoing.

Participants are recruited preoperatively from tier 4 obesity services and followed for one year post-surgery.

A sexual quality of life-female (SQOL-f) questionnaire² is completed pre-operatively, and at routine reviews 3, 6 and 12 months post-operatively.

The SQOL-f can be completed regardless of sexual orientation or relationship status. There are 18 questions given a score from 0 to 5. Total scores are expressed as a percentage (higher score = better quality of life).

Results

To date 39 women have completed the SQOL-f at baseline and at 3 months post-operatively.

Demonstrated in figure 1 the median score at baseline was 39% (IQR 34%), increasing to 53% (IQR =50%) at 3 months post-operatively.

4/39 (10%) showed a decrease in their score from baseline to 3 months, 15/39 (39%) were unchanged (taken as <5%) and 20/39 (51%) showed an improvement in SQOL.

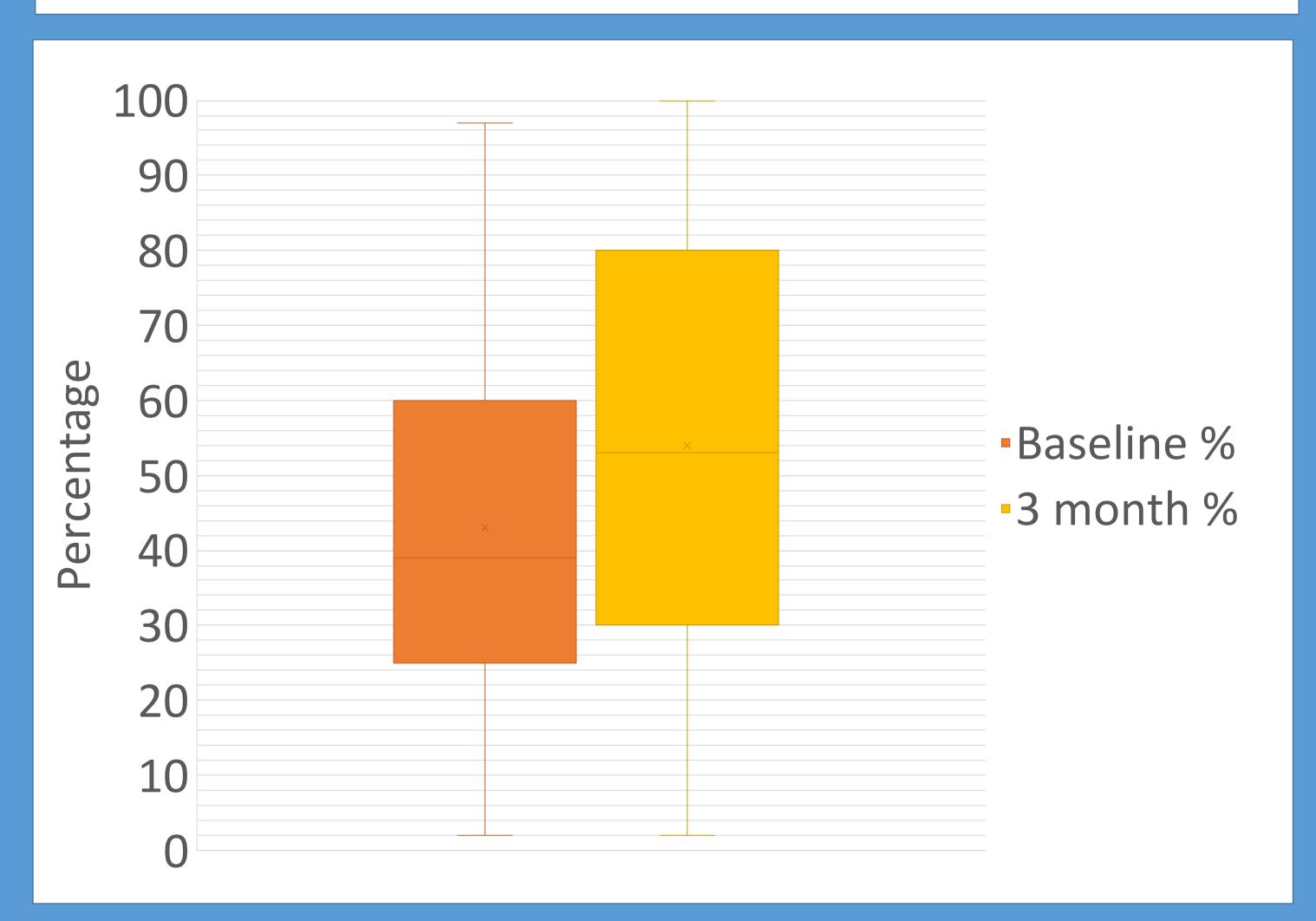


Figure 1: Box and whisker plot demonstrating SQOL scores (%) at baseline and 3months (n=39).

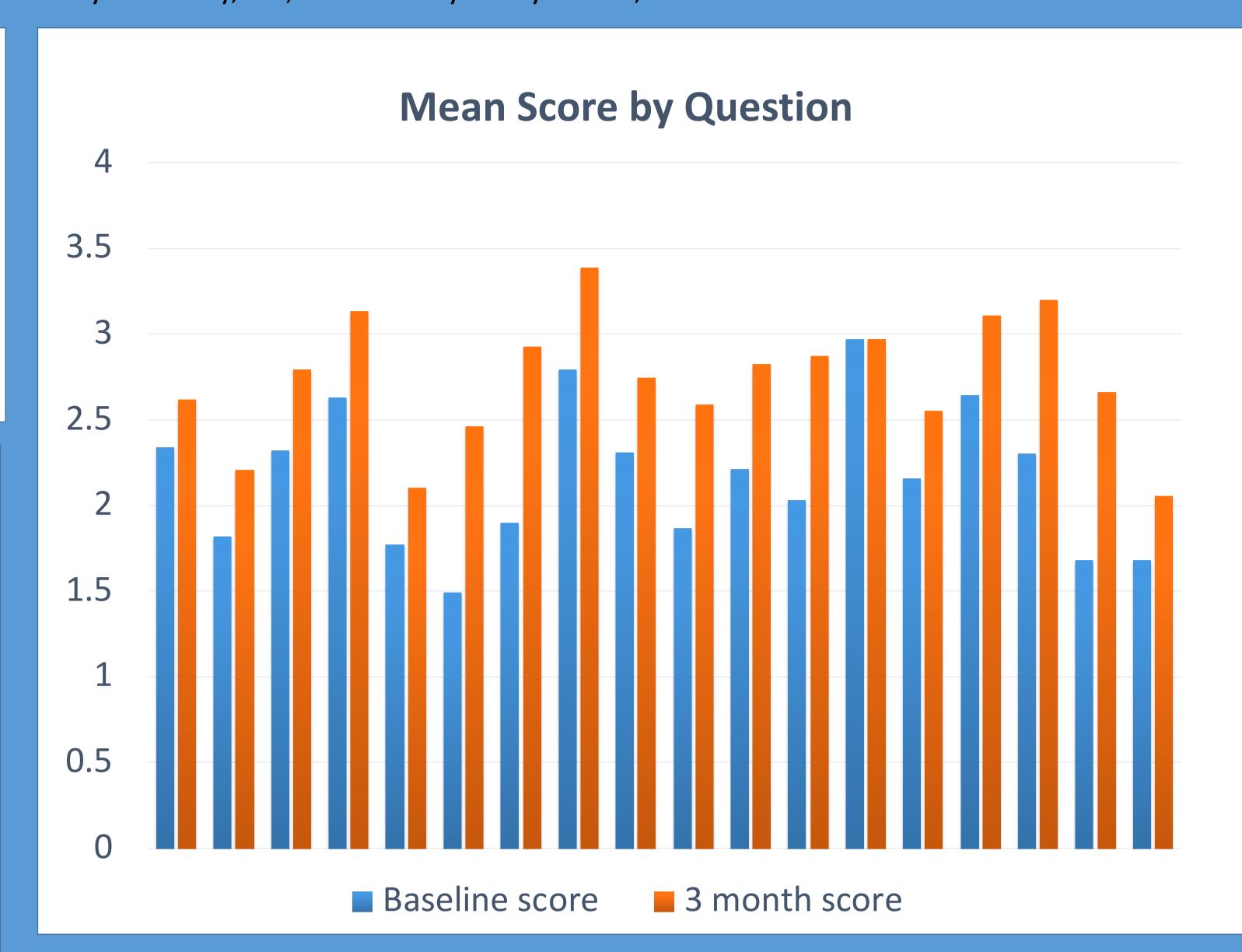


Figure 2: Change in score by individual question from baseline to 3months (n=39)

Figure 2 demonstrates that all question showed improvement in mean score between baseline and 3 months, with the exception of one which remained unchanged.

"When I think about my sexual life, I feel I can talk to my partner about sexual matters"

Body mass index (BMI) decreased from 46 ± 7.9 kg/m² before surgery to 37 ± 6.8 kg/m² at the time of the second questionnaire. All women experienced weight loss by this stage.

Degree of weight loss did not correlate with changes in score.

In free text comments 2 women responded:

"I am more self conscious than pre-surgery, I hate how my body looks"

and

"my husband still sees me as fat and won't go near me"

This offers insight into the reasons why some women showed no improvement or a deterioration in sexual quality of life.

Conclusion

Interim analysis suggests improvement in sexual function in women of reproductive-age three months after bariatric surgery.

Whether this benefit persists as length of time from surgery increases and if improvements in SQOL translate into fertility outcomes requires further study.