

Patients with Benign Thyroid Diseases Experience an Impaired Sex Life

Nadia Sawicka-Gutaj,¹ Marek Ruchala,¹ Ulla Feldt-Rasmussen,² Åse Krogh Rasmussen,² Laszlo Hegedüs,³ Steen Joop Bonnema,³ Mogens Groenvold,⁴ Jakob Bue Bjorner,^{4,5} and Torquill Watt^{2,6}

Background: This study aimed to characterize the frequency of self-reported thyroid-related impaired sex life in patients with thyroid diseases, to examine its clinical correlates and relationship with overall quality of life (QOL), and to investigate the effect of treatment.

Patients and Methods: Two separate patient samples with benign thyroid diseases were investigated: a cross-sectional sample (759 women and 118 men) treated at two Danish university hospital outpatient clinics, in 2007–2008, and a longitudinal sample (358 women and 74 men) undergoing treatment at the abovementioned centers, during 2008–2012, evaluated before and 6 months after therapy. The thyroid-specific QOL questionnaire ThyPRO was used to measure patient-evaluated thyroid-related sex life impairment. Biochemical and clinical variables were analyzed (i.e., age, education, degree of thyroid dysfunction, comorbidity, serum thyrotropin, total thyroxine, and triiodothyronine, as well as thyroperoxidase and thyrotropin receptor antibody concentrations). The SF-36 Health Survey was used to analyze the effect of impaired sex life on overall QOL.

Results: In the cross-sectional sample, 36% of women and 31% of men reported what they perceived to be thyroid-attributable impaired sex life. Women with autoimmune thyroid diseases reported more impairment than those with non-autoimmune thyroid diseases. In patients with Graves' disease lower levels of educational attainment and in patients with toxic nodular goiter comorbidities were associated with impaired sex life. Overall QOL was lower in patients with thyroid-related sex life impairment. In the longitudinal sample, 42% of women and 33% of men had impaired sex life at baseline, which improved at 6 months follow-up only in women and, when analyzing individual diagnoses separately, statistically significantly among those with autoimmune hypothyroidism. Sexual impairment was associated with low education in patients with toxic nodular goiter and with high plasma triiodothyronine concentrations in patients with Graves' disease. In autoimmune hypothyroidism, a younger age was associated with sex life impairment.

Conclusion: We found a high frequency of self-reported, thyroid-related sex life impairment in patients with benign thyroid diseases, especially in young women with autoimmune thyroid diseases. Self-perceived impaired sex life persisted in women treated for Graves' disease, suggesting that normalization of thyroid function was not sufficient to restore sexual function.

Keywords: quality of life, sexual dysfunction, thyroid autoimmunity, Hashimoto's thyroiditis, Graves' disease

Introduction

BENIGN THYROID DISEASES ARE COMMON ENDOCRINE disorders, with a well-known negative influence on overall quality of life (QOL) (1–7). While much is known about the effects of treatment of benign thyroid diseases on biochemical changes, mortality and morbidity, data on the impact of chronic

benign thyroid diseases on the quality of sex life are scant. Sexual dysfunction in patients with thyroid diseases might result from hormonal changes, thyroid autoantibodies, psychological imbalance, and somatic symptoms in the genital organs, as well as from psychiatric and somatic morbidity. These complex alterations are often associated with infertility (3–5). Thyroid patients also experience changes of appearance, most prominently in

¹Department of Endocrinology, Metabolism and Internal Diseases, Poznan University of Medical Sciences, Poznan, Poland.

²Department of Medical Endocrinology, Copenhagen University Hospital Rigshospitalet, Copenhagen, Denmark.

³Department of Endocrinology and Metabolism, Odense University Hospital, Odense, Denmark.

⁴Department of Public Health, University of Copenhagen, Copenhagen, Denmark.

⁵Optum Patient Insights, Johnston, Rhode Island.

⁶Department of Internal Medicine, Copenhagen University Hospital Herlev Gentofte, Herlev, Denmark.

Formålet med dette studie var at undersøge thyroidea-patienters oplevelse af nedsat sexliv, inklusiv sammenhængen med kliniske variable og livskvalitet, samt effekten af behandling af thyroidea-sygdommen.

Til dette undersøgte to populationer: et tværsnit af patienter med benign thyroideasygdom i de endokrinologiske ambulatorier på Rigshospitalet og Odense Universitetshospital (759 kvinder og 118 mænd) samt patienter, som undergik behandling for thyroideasygdom (358 kvinder og 74 mænd). Patienter i tværsnitsstudiet besvarede livskvalitetsspørgeskemaet ThyPRO én gang, mens forløbs-patienterne besvarede skemaet før og 6 måneder efter behandling.

Hypigheden af den oplevede negative påvirkning af sexlivet og sammenhængen mellem dette og en række kliniske variable samt den overordnede livskvalitet, målt med spørgeskemaet SF-36, blev undersøgt.

Vi fandt, 36% af kvinderne og 31% af mændene i tværsnitsstudiet angav negativ indflydelse af thyroideasygdommen på deres sexliv. Mere hos kvinder med autoimmun årsag til deres thyroideasygdom end ved ikke-autoimmun årsag. I forløbs-populationen rapporterede 42% af kvinderne og 33% af mændene negativt påvirket sexliv. Seks måneder efter iværksat behandling faldt andelen til 34% blandt kvinderne, mens andelen af mænd med påvirket sexliv var uændret. Blandt patienter med autoimmun hypothyroidisme var påvirkningen værst hos yngre patienter.