

# Improving quality of care among women with genital diseases, attention to patients' mental health and sexual dysfunction

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## Introduction

Reduced sexual activity and dysfunctional problems are highly prevalent in females. Approximately 43% of American women reported experiencing sexual problems. Anxiety, depression and sexual dysfunction are highly prevalent among women undergoing endoscopic surgery for ovarian, tubal or uterine lesions; Depression is significantly associated with anxiety as well as sexual dysfunction. Some studies have shown that having genital disease can lead to anxiety, depression and sexual dysfunction. However, the mental health of females suffering from genital diseases has been little focused and studied. Therefore, this study aimed to examine anxiety, depression and sexual dysfunction of women with genital diseases.

## Study question:

What is the prevalence of anxiety, depression and sexual dysfunction among Chinese women who is suffering from genital diseases, and how do they correlate with each other. Different genital diseases may have different impact on sexual function. What specific pathologies are your subjects having?

## Study design, size, duration:

The investigation was carried out from March to November, 2020. Participants were recruited in the Hong Kong University-Shenzhen Hospital, Shenzhen, China. 135 patients with genital diseases, aged 18-55, were approached while 116 agreed to join the survey.

## Participants/materials, setting, methods:

116 women (35.42±8.19 years old) with a diagnosis of fallopian tube disease, ovarian benign disease or uterine disease voluntarily filled a questionnaire which included the Female Sexual Function Index-6 Items (FSFI-6) and the Hospital Anxiety and Depression Scale (HADS). Descriptive analysis and stepwise regression were used to present participants' self-reported anxiety, depression, and sexual dysfunction problems, as well as the association between their anxiety, depression, and sexual dysfunction.

## Main results and the role of chance:

As shown in Table 1, 25% of the participants reported anxiety symptoms; 9.5% of the women reported depressive symptoms; while 37.3% reported sexual dysfunction problems.

Table 1 Results of reported symptoms of anxiety, depression and sexual dysfunction

Symptoms	Number (%)	Mean±SD
Anxiety (n=116)	29 (25%)	5.38±2.82
Depression (n=116)	11 (9.5%)	4.09±3.24
Sexual dysfunction (n=102)	38 (37.3%)	18.77±5.79

Table 2 showed the two stepwise regression models on depression and sexual function (Regression 1: R<sup>2</sup>=0.40, F(1, 113)=36.62, p<0.001; Regression 2: R<sup>2</sup>=0.05, F(1, 100)=5.12, p<0.05). A high education level would predict less depressive symptoms (p<0.01). Anxiety (p<0.001) was significantly positively associated with depression. Depressive symptom can significantly predict sexual dysfunction (p<0.05) while anxiety was not associated with sexual dysfunction (p>0.05). A higher level of depression was related to poorer sexual function (-0.25, 95%CI[-0.48, -0.03]).

Table 2 Regression on depression and sexual function

Independent variables	Regression 1:Depression			Regression 2:Sexual function		
	β	95% CI	p	β	95% CI	p
Education	-1.12	[-1.76, -0.47]	<0.01	-	-	NS
Anxiety	0.64	[0.47, 0.80]	<0.001	-	-	NS
Depression	/	/	/	-0.25	[-0.48, -0.03]	<0.05

Note: CI= confidence interval; NS= not significant

## Conclusions and implications

The mental health status of women with genital diseases in China was worrisome. This investigation highlighted the importance to intervene on the mental health and sexual function of women with genital disease, which are essential for the improvement of patients' health-related quality of life.