

Ep #18: December Flowerside Chat: Part Two



Full Episode Transcript

With Your Host

Dr. Sonia Wright

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You are listening to The Midlife Sex Coach for Women Podcast, episode 18.

Female Announcer: Welcome to the Midlife Sex Coach for Women Podcast, the only show that combines a fun personality, medical knowledge, sexual counseling and life coaching together. To create unique sex coaching that helps busy women awaken their libidos, address intimacy issues and learn how to express their sexuality for the rest of their days. Here is your host, certified life coach and sexual counselor, Dr. Sonia Wright.

Hello Diamonds. This week we have the second half of our newest flowerside chat. But first I wanted to take a minute to wish you a Happy New Year. We will be talking more about approaching the new year in the next episode. But as we start this new year of 2021 I just have a few questions for you. What do you envision your sex life to be like in 2021? What are your hopes and dreams for your sex life? And do you know that you are the only person who determines your future? You are the one that is in control of your decisions.

Your sex life does not need to be left up to chance. If you're willing to do the hard work and feel the discomfort then anything is possible for you in 2021. Do you want more intimacy in your life, more touching, more loving? Do you want more connection, more satisfaction and more pleasure? Do you want to just have more fun? I want you to just know that these things are available to you and that anything is possible. So what do you want your sex life to look like in December?

What do you want it to look like on December 31st, 2021? You know what, Diamonds? It all comes down to willingness, your willingness to do the hard work. But you know what? You don't have to do it alone. I am your sex coach and I am committed to be with you and to be here every step of the way in 2021 on your journey to owning your sexuality. It is possible to have the sexual intimacy that you deserve with yourself and with your partner.

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And in 2021 it's really my wish for you to get that, for you to be able to own your sexuality and to create the sex life of your dreams.

So, Diamonds, welcome to 2021. Hold on tight because it's going to be a fun ride in more than one way. Okay, lots of love.

Alright, let me see if there's anyone. Okay, so another question I have here and please keep these questions coming, I'm just having a great time and I'm hoping that you're getting the information that you need. Any question that you have I am here to answer. And if I don't have the answer I will look it up and get back to you. I will send out an email with the replay and make sure that I answer any question that I was not able to answer on the call.

When is the best time to address expectations of sex duration? We don't seem to be on the same page on how long we have sex. Sometimes I want it to be 10 minutes, and he wants to keep going, suggestions. I don't like to disappoint him. Now, this is where I'm going to talk to you a little bit about. There's, you don't like disappointing him. You may be feeling guilt and shame, and some other feelings there. But if it's going on too long probably your predominant feeling is going to be avoidance or annoyance.

You're going to be at this place where oh God, if I have sex and I only want sex for, you know, penetrative sex for 10 minutes and he's going to go on for an hour. You've got this whole scenario probably going in your mind, that's going to stop you from being interested in sex. You're like I'm not even going to start because this might take an hour or a half hour and that's going to irritate me. I'm not going to enjoy it. Your mind has already gone to all those places. So you're getting to this place probably where you're not enjoying sex and you're not thinking about wanting sex.

So yeah, I have a podcast episode called Difficult Conversations, it might be episode eight. I'm not quite sure. I'm just about to release episode 16. So when we're talking about these difficult conversations, when to have them and how to address them, it's a very good question. So I usually suggest to people that they spend time writing out their feelings and their

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thoughts and what's going on. Your thing is I don't want to disappoint him. But I'm quite sure you have some other thoughts around it in terms of the length of time and maybe that's having some issues.

So I usually suggest writing out all your thoughts and all your feelings so you get it all out, so it's not pent up inside. And then just go to your partner and say, "Hey, I'd really like to talk to you about an issue about sex but I want to make sure it's a time that's good for you. So what time would be good?" Instead of just springing it on him, so, so often we've been holding onto this for so long that we're just like, "I've got to talk to you about this right now." And that's not necessarily that they're like, "Whoa."

Or invariably it happens on the day when they have had a lot of stuff going on at work and they're exhausted and then they get home and you've been waiting the whole day to talk to them. And they're like, "Whoa." And then it doesn't go well. So I usually suggest writing it all out, your thoughts and feelings and everything like that to get it out of your system and onto paper so that you can breathe and relax a little bit.

And then decide when do you want to talk and go to your partner and say, "Hey, there's something that I'd really like to talk. And this is something that I want to talk to you about together as a team so we can kind of sort this out." And then just come from this place of, "Hey, I really am enjoying sex with you but at the same time it's taking a long time which is causing pain and irritation", or whatever it is that's happening. "And so I want to address this because I find myself avoiding sex and I don't want to be in a place of avoiding sex." So these are some of the things.

And I work with people to have these conversations, to practice it so you kind of know what's going on. And usually they have an idea that something's happening too. And it's like the big white elephant in the room that nobody wants to talk about and just getting it out just feels like a lot of relief. But I also suggest that you allow your partner to be wherever they are with it. Recognize that it's not a one and done type of conversation. It

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may be something where you have to talk about it for a little while, and go back and forth, and communicate and figure out.

Maybe you guys get to this place where it's like, "Okay, I'm comfortable with 10 minutes but you need an hour. So maybe 10 minutes is good then we stop."

Have you ever heard of a masturbation sleeve? So I love knowing about toys as well as other things because then you can incorporate toys into the bedroom. They have a lot of vibrators out there now for men, which is a wonderful thing. So you could have the penetrative sex or you can start with the vibrator for him. And then when he thinks that he's very close to coming then you can at that point in time go and have sex and have penetrative sex at that point. You can incorporate his vibrator as part of foreplay as well. So there's lots of different ways that you can do this.

So I hope that answers your questions, if you have more questions about that, please put in the chat or put it in the Q&A and we can address it some more.

Alright, let's see. This is a long question, we are going to get through it, let's go. "I had a hymenectomy", so that's like your hymen is kind of removed "two years ago." So for some reason there is maybe a piece of the hymen still there and that maybe it was causing irritation or pain and it needed to be removed. "And the doctor discovered that I had two vaginas. I didn't know how to feel because I don't know anyone else who has two vaginas. I feel undesirable.

I'm working on overcoming my fear of sex and self-love, any recommendations to help me overcome my fear of sex, books, meditation practice, self-talk, positivity, etc."

Okay, let me just start with I'm a radiologist and this is kind of like a uterine anomaly. I don't know if you have two uteruses or just two vaginas. It could be didelphys, maybe that's something that you've heard, a term that you've heard. But as a radiologist I see this not infrequently. So the first thing that I

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want to assure you is that it does happen, it can happen and just because this has happened, this is just a congenital developmental type of issue and it happens and then when you're like, "I don't feel desirable."

Now, there's people that have two vaginas, and they have two uteruses, and they have sex, they're not even aware of what's going on. And it may be the case that they needed to open it up or they needed to do a little bit of a procedure or whatever. But this is you. This is your beautiful body. And this is how you were made and this is your uniqueness. Because you have two vaginas does not necessarily mean that you can't engage in pleasurable wonderful sex for you.

And so in terms of the coaching, and I usually don't do a lot of coaching, but I would look at your thoughts around yourself that you feel undesirable. In some ways you might be – you get to think your thoughts, and you get to look at them. And I always say, "Is that thought serving you?" Because I see this in young girls and they grow up to become women. But I'm a pediatric radiologist so I do see this not infrequently. And I know that the majority of them are going to grow up and going to have a healthy sex life and so that is open to you as well.

And you get to figure out how it looks for you, how you want that sex life to be for you. But it does start with your thoughts. If you're having the thought that you're undesirable or you feel undesirable, and there's thoughts that's leading to you feeling undesirable, I don't know what those thoughts are, like there's something wrong with me or whatever. But those thoughts are optional and you get to also decide that this can happen, and it can. And that you can still have a beautiful pleasurable sexual intimacy with yourself and with your partner, you can definitely do this.

So in terms of books, and I would have to look and see what type of books are out there in terms of specifically for anomalies, uterine anomalies. And I'm not certain that there's a lot of books out there. I love my favorite book is *Come as You Are*. So this is my favorite book, *Come as You Are*. And it does talk a lot about women's sexuality and how they perceive themselves.

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And how you get to own your sexuality. And my course is called Own Your Sexuality Now. And I work to help all women recognize that they can be a sexual being if they want to.

There's a small percentage of people that are asexual or demisexual. Asexual is that they don't necessarily feel their sexual drive and they're not interested in sex. They can still have loving close relationships and they're not necessarily interested in sex. Or demisexual which is they really need to have a really close intimate relationship with somebody before they could actually have a sexual relationship as well. But for the majority of people, majority of women we are sexual in nature. You get to define your sexuality.

You could be thinking I'm doubly sexual or I'm doubly beautiful and amazing because my body has created two vaginas. And so you get to choose your thoughts. The important thing is to decide are those thoughts serving you, are they helping you? And you can change your thoughts because you can definitely have a healthy sex life with two vaginas.

And I don't know if your didelphys, which means you also have two uteruses. But there are women out there that have that. And there's some women that don't even know that they have it. And so they're not having this thought that they're somehow undesirable. So I would suggest that you write and journal about it. And spend some time in the feeling. I'm not one to jump straight to feeling happy and everything's wonderful and perfect.

If you're feeling undesirable then stay in that feeling for a little bit, write it all down. And then get to that place where you recognize that you are unique and wonderful. And your sexual intimacy can be wonderful and off the chain, it still can be. You still have a clitoris, which is the center of the majority of your pleasure. And you can still have sexual intercourse with your vagina. If you're having problems with it then talk to your doctor, the doctor that did the surgery or whatever you need to do.

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If you need dilation in there, there's different things that may be necessary, but keep working on that. And then meditation practices, definitely. And that's focusing on your breathing and your relaxation. And get to know your special body. And this is where I say that self-pleasure is important for you so that you get to know your body, and recognize how it functions, and recognize that you can have sexual pleasure just like anybody else so that you can get to this place where you recognize that you are desirable. You're not broken, you're beautiful and you're unique.

Okay, so those are important aspects that I would look at, yeah, you're just wonderful. And I am here to tell you that I do see this in radiology. And I see all different forms of it and it's okay and it can be sorted out. And there's nothing wrong, nothing has gone wrong. Yes, it may look maybe a little different, and maybe something has to be done but it can be improved. And your vulva, your vulva is just like everybody else's vulva. And you get to choose your incredible sexual intimacy.

You get to choose how you want to be sexual. And you get to celebrate you because you are fantastic, and unique, and wonderful and it's okay, it's really okay, you're fine.

Alright, so let's see. We've got 10 minutes more, so let me see, any other questions that people have, please keep the questions coming. This is why I'm here, because I want to make sure that I provide this service for you. I did want to talk about pain with sex. And we talked about it a little bit but I know there's a lot of women out there that are just bearing it. They're just like, "This isn't the best thing in the world but I'll just get through it. I'll slap on some lube and get through it."

If you're having pain with sex go and talk to somebody about it. Go and talk to your gynecologist, go and talk to your primary care person. If they're not listening to you go and talk to other doctors out there. You can get the treatment and the care that you need. If you're having pain with penetrative sex, do not equate penetrative sex as the only type of sex that there is. You get to create the sexual intimacy the way you want to create it. And this is

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so important. You get to create that sexual intimacy any way that you want to create it. There's so many different ways to have that sexual intimacy.

So if penetrative sex is a problem, that's fine, but keep that connection, that touch, keep that going. There's oral sex. There's making out. There's masturbation sleeves for him. There's something called a Fleshlight and that works pretty well. There's tons more and more products that are coming out.

I'm just going to put in the chat, let's see www.hartsdesires.com and that's a great place to look for all different toys. It's a beautiful place. I do have to say I have an affiliate for it. It's a women owned business, it's a minority owned business and they have all the toys there. Dr. Sonia is a code that you can use to get 10% off. And now we're in the holiday season, feel free to go there. But go there and look. They have a section for toys for women, a section for toys for men, a section for couples' toys. There's a lot of different options that are available for you.

And you don't have to necessarily be like, "I can't have penetrative sex because I'm in pain and so I need to shut it all down." The same thing with erectile dysfunction, I wanted to talk about erectile dysfunction. There's so many women out there that are coping with their partner's erectile dysfunction. And the partner may not be doing anything about it. And on the one hand you can't make another person do something. So you kind of have to look at the situation and be like this is the situation that I'm in.

But it's important for you to be able to preserve your sexuality and to really enjoy your sexuality. If it means that you add toys in then you add toys in. If it means that you, you know, I'm not advocating but there's different ways to do this. You could have honest conversation with your partner. And you can look into polyamory or a different way to have a partner in this situation. There's a number of different things that can be done. There's dildos, there's strap-on dildos.

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I like to be graphic in this area because this is something that a lot of women are dealing with and they don't know exactly how to address this issue. There is many ways that it can be addressed, but it's important to be able to connect and to talk things through and have those difficult conversations if you need to have those conversations.

So let me see if there's any other questions that we have out there. So we talked about lube and positions. And I'm just trying to think, and diabetes and heart disease. Yeah, for ED there's usually an underlying health issue going on with your partner if they have erectile dysfunction. And they may not want to go to the doctor because they don't want to deal with the underlying issues of hypertension, or diabetes, or obesity, or whatever. And also because our society is so focused on, like there's certain roles that men are allowed to have.

And so one of the roles is to be the sex provider, to be the one that always has an erection, is always ready to go. And so when you get to this place of ED they almost equate their erection to being a man. And if they don't have the erection then part of them of being a man is not there. And so there's a lot of strong thoughts that people are having. And so you can imagine that it might be hard for them to be in this place where they would go deal with those issues because they have to own up and have to talk about things that are hard for them to deal with.

So, on the one hand you might be very frustrated because your partner is not going to deal with this. And this is for any type of sexual difficulty or sexual dysfunction, not specifically ED. But you can't necessarily change the situation at this moment so you do need to focus on yourself and make sure that you're getting the pleasure that you need. And make sure that the conversation continues. And make sure your self-care is there.

I'm going to mention self-care just for a minute, just overall self-care. So a lot of times women come and they talk to me about the fact that they're not having pleasurable sex, or they're not interested in sex. And a lot of it has to do with self-care as well.

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We get to this place where we're trying to like, "Okay, my partner says that I need to have sex more so okay, how can I have sex more often, Dr. Sonia?" That's what they come and ask me. And I'm like, "Well, are you enjoying yourself?" And they're like, "No, not really, I just want to get the number up so that they stop complaining, my partner stops complaining." And instead we talk to it like, "What is your self-care like? Are you sleeping enough?" And this is for all of you, are you sleeping enough? Are you getting nutritious food? Are you stressed out of your mind?

And then trying to have sexual intimacy with this situation going on, take care of yourself first. Make sure the sleep is there, the nutrition is there, the exercise is there. Be good to yourself, if you need to meditate, if you need to take time for yourself. Women are taking care of so many other people that it's important that you recognize that you need some downtime for yourself. And you need self-care. Sometimes self-care is about having that difficult conversation because he's pounded away for 40 minutes and you're in pain. That is part of self-care.

Sometimes self-care is recognizing that your body has changed and you're going to need to take the time to do sexual care which is figuring out how your body works now. You might be post menopausal, you're not having orgasms, or you might be postpartum and your body shifts at different times in your life. And with that shifting it's almost like you have to rediscover your body again.

And I'm 54 so I've gone through those menopausal stages where I was like, yeah. No, I'm not interested in sex at all. But it can come back if you put the time and effort into it, your interest in sex can come back. And you can have a fabulous sex life. And whatever is going on with your body, if things are shifting with your body, it doesn't have to stay the same but self-care is involved here. Take the time to listen to your body and it'll tell you what it needs. So I am saying that self-care is something that's very important for all of you to engage in.

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And self-care may also be, if you're procrastinating about something and you know you need to take care of it, that you get up and you sort that out. You get up early, you take care of whatever needs to be taken care of. That's part of self-care. It's not all about bubble bath and bon bons. Sometimes it's about doing the hard work, having the hard conversations, taking care of our body, whatever it is, but your self-care needs to be there as well. So I'm going to advocate for you to watch out and take care of yourself.

Okay, so I have a question here which is, "I'm in my early 40s, no child, partner and I have been trying for six months, blood work is good, any natural ways to increase chance of pregnancy?" Now, that I'm going to defer to your gynecologist and your ob gyn. That's not kind of my focus area I have to say about that.

But I can talk to infertility stuff because in terms of infertility sometimes that has an effect on our sex and our sexuality. And we get to this place where we're just thinking about having sex for procreation to have a baby and to get pregnant. And it adds this layer of stress in there. So while you're figuring out what to do in terms of increased chance of pregnancy naturally. If you're in your 40s, your early 40s now is the time to go see your gynecologist and your ob gyn because, honestly, when you get past 40 your chances are decreasing.

And so you don't necessarily want to spend six months or a year trying to get pregnant naturally, you want to go and at least be talking to your ob gyn now. And you can continue to work on trying to get pregnant. But if you're older you need to be tapped into the system now and that's honestly. And I can talk to you about that because I went through IVF in my 40s and I was in a similar position and you don't necessarily want to wait.

Now, having said that, in terms of your sexuality, that's something that you will, if you're dealing with infertility sometimes you'll get to this place where you're so focused on trying to get pregnant that the joy almost leaves the sexual encounter. And so what's going to be important for you is also

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keeping the joy in there, you know. And sometimes I talk to women that are trying to get pregnant and I say, "Consider it a play date." It's a sexual play date; you're checking your temperature. You're looking at your hormonal chart and things like that and you're like, "Okay, this is my window."

Well, have fun with the window, don't make it a chore, don't make it so stressed out that you're not enjoying yourself. So whatever it is that you choose to do in this regard, make sure that also you continue to have the joy, the touch and not get so focused on that, if you can focus also on the connection with your partner that's going to be an important part of all this.

Alright, just checking on the time here, it looks like we're just at an hour. Any last questions before we leave this month's flowerside chat? And it's so good to be here with you. So I thank you all for showing up and for being here. And I love the questions. Keep the questions coming and thank you for being vulnerable enough to talk and ask the questions that you needed to get out. I am here for you. This is why we do it as anonymous. Let's see if there's any other things.

"What makes my vagina extremely tight after sex?" I'm not exactly certain. It may be that your muscles, the pelvic floor muscles tighten up after sex. Maybe they've been over-stimulated and they tighten up. If you're having pain you might want to check on that. You might want to check out physical therapy for pelvic floor pain, sorry, for pelvic floor tightness. That would be something that I would look at if you find it disturbing you or bothering you.

If you feel like your whole pelvis, or you have problems walking later on or there's some sequela, something that happens subsequent to or after you've had sex then you may want to look into some physical therapy around that. I'm not exactly certain. I would also bring that to your gynecologist to find out what exactly is tightening. Is it the muscles that are getting tight? Is there more edema in that area? So those are kind of the things, and so check that out with your gyn.

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“What is polyamory?” Okay, I’m going to address this question but it is 9 o’clock, so if anybody needs to leave, go ahead and leave. Polyamory, poly many, amory love, so, many loves. It’s a form of consensual non-monogamy. So consensual non-monogamy, it’s on a spectrum which basically means that consent, so everybody involved understands that there’s other partners. And non-monogamy just means not monogamous, not with one person, but more than one.

So it’s a whole spectrum of activities where you could be a swinger or just get together with a couple or a person for sex all the way to having longstanding loving relationships, which can include sex or not include sex. So when somebody says they’re polyamorous, it may have a component of sex where they have sex with different partners. Or they may just have loving relationships because polyamory is about loving relationships at its core. And it’s also about people recognizing that there’s more than one partner.

So you could have – there’s any type of models of polyamory where it could be three people in a relation together, four people in a relationship together. It could be one partner that chooses to be monogamous and the other partner is polyamorous and has more. There’s so many different configurations. But polyamory has to do with more than one love and using more than one partner, yes, more than one partner and then different types of configurations.

And then, “What are signs of pre menopause?” Well, over a period of time your estrogen levels are going to decrease. So things that can be signs is decreased lubrication. Some people say that their libido does drop. Some people feel that their cognitive function may be not the way it was previously. Everybody kind of has their own way of going into pre menopausal time. Usually it starts somewhere in your 40s, some people a little earlier than others, but usually in the realm of the 40s is where you start feeling like something’s a little off.

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If you feel like your brain is a little fuzzy, that's the cognitive side of things. But honestly, when you're perimenopausal and pre menopausal, or going into menopausal, it's almost like every different type of symptom that you could get, some people get colds. Some people have pain. Some people feel different sensations and tingling in their hands. It can be some people have tingling in their face, whatever it is, the estrogen is dropping in your system and you are having manifestations, however. It could be hot flushing. And some people hot flush years before they lose their period.

So menopause for those of you, it's like a year without having a period, so, from whatever point that you stop having a period all the way to one year and then you're post menopausal after that period of time.

Alright, so I think that we have come to the end of our time together. It's so good having you here. I am here to answer any of your questions. If you need to talk to me about anything else you can always reach me at sonia@soniawrightmd.com. My website is Sonia Wright MD. You can reach me from there as well.

And I have the course, Own Your Sexuality Now. And if anybody's interested you can join at this point in time. And I usually roll it over into the next block as well. So you can get started if there's anything that you're dealing with then I enroll you right now and then we continue from there. Feel free to reach out if you have any questions. It's so good to see you here. Thank you for joining me and have a great evening. Thank you.

To celebrate the launch of the Midlife Sex Coach for Women Podcast I'm going to be giving away a \$50 Amazon gift card to five lucky listeners who subscribe, rate and review the show on Apple Podcast. It doesn't have to be a five star review, although I would really love it if it were a five star review. But more importantly, I want your honest feedback so I can create an amazing show that provides tons of value.

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Visit www.soniawrightmd.com/podcastlaunch to learn more about the contest and how you can enter. I'll be announcing the winners on the show in an upcoming episode.

Okay, that's all for now, see you next time Diamonds.

Female Announcer: Thanks for listening to this week's episode of the Midlife Sex Coach for Women Podcast. If you enjoy Dr. Sonia's fun and caring approach to sexual intimacy, head to soniawrightmd.com to learn more.