

## Ep #49: Mismatched Libidos



### Full Episode Transcript

With Your Host

**Dr. Sonia Wright**

## Ep #49: Mismatched Libidos

You are listening to *The Midlife Sex Coach for Women™ Podcast*, episode 49.

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, it's Dr. Sonia. How are you all doing? You know how I'm always encouraging you to do and try new things? Well, I'm taking a page out of my own playbook and I'm headed up north. For those of you that are not familiar with Minnesota, when we say we're heading north, we're talking about going up to the land of the lakes, the cabins, nature. We have lakes throughout Minnesota but really a lot of our lakes and our getaway places are up in the northern part of Minnesota, it's where we go to commune with nature.

So, when I say I'm going up north, I'm going to the wild. I am definitely a city girl. And I've lived the majority of my life in and around San Francisco or in and around the twin cities. But I was actually raised in a small town in Massachusetts and spent a lot of time in the woods behind my backyard. And so, this is kind of like going home, going back to my roots when I go up north and get into the wild. So, in some ways going up north is it's reconnecting with nature and the part of me that seeks the solace and the peace that I found in nature when I was younger.

And also, because it's something I haven't done in a really long time, my mind wants to tell me that it's going to be dangerous, that something's going to go wrong. I'm going to die up there. There's snakes, there's bears everywhere. I'm probably going to be eaten alive, that's what my brain is telling me. But sometimes we have to challenge our brain. We have to challenge our thoughts. We have to look at these beliefs and decide which

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ones we want to keep, which ones are serving us and which ones we might want to prove wrong.

So maybe I'll go up north and I'll have a great time. Or maybe I'll go up north and die a horrible death, hopefully not. Hopefully I'll be on next week's podcast without any problems. But the odds are it's going to be somewhere in between. And I get to tell my brain that that is okay. And I get to think whatever I want to think about, a subject or whatever I want to think about and experience. That's exactly what I espouse. It's what I teach. We get to think whatever it is we want to think about it and experience. So, make sure that it serves you.

So, let's look at another experience or situation which is mismatched libido. We can decide what we want to think about in this scenario as well. And I'm bringing up mismatched libido because it's something that more and more my clients are coming to talk to me about. For the majority of the time the women tend to be ones with the lower libido, the lower interest in sex but not necessarily. When we get into our 40s and 50s and beyond our partners, if we happen to have male partners, our partners may also be dealing with lower libido.

So, I notice as my clients are getting older that they're coming to me. And there's a higher percentage where their male partners are not necessarily wanting to engage in sexual intimacy and they're concerned about this. So, let's start at the beginning. What exactly is libido? Libido is your drive, your interest in sexual activities. It can increase. It can decrease over time. It can stay the same throughout your lifetime. But for most people it fluctuates based on a number of physical and life factors and the context that's going on in your life basically.

So mismatched libido is basically when the libido levels or desire of the individuals in a relationship does not match. And society says that something has gone wrong. But my first question is you get to decide if something has gone wrong. So, the question is, has something gone wrong? Is this a problem? If it's not a problem then don't worry about it. If

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your libido is at one level and your partner's libido is at another level and you two figure it out, or three or more, if you figure it out then that's okay. There's nothing has gone wrong.

You are the one that first off decides if this is a problem. And then second, I want you to recognize that mismatched libido is very common. I'm not certain why society says that people in a relationship need to have the same libido level. Nothing has specifically gone wrong. So, remember, if you don't consider it an issue, it's not an issue.

And often what we do is we look at what our desire or our libido levels were at the beginning of a relationship. And usually at the beginning of the relationship the levels are much more matched. But at the beginning of a relationship, you're in what many people call NRE energy which new relationship energy. And that's kind of when you want to fuck like a bunny. You're just at it all the time. You see the person, you're interested in. you're engaged, you want to go. And it's also aligned with more spontaneous libido.

But recognize over a period of time that NRE energy changes, or dissipates, or goes away or it becomes something that's more of a steady interest and a love. And that's okay, nothing has gone wrong. It's just a new phase in your relationship and there is no problem with this. So, if one person wants sex or sexual intimacy more often than another person in a relationship it's just something to work on if you decide that it's a problem.

And another thing that I want to mention is don't specifically compare the amount of sex that you are having in your relationship with the amount of sex that somebody else is having in their relationship. These are very different relationships and it involves different people. So, there's no one standard amount of sex and sexual intimacy that there has to be in a relationship. It's not like there's a prerequisite that there be sexual intercourse and penetration two to three times a week. And if you're not necessarily having that then that's a problem.

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No, once again, I feel like I say this all the time, I need to have this tattooed on my forehead when I'm doing my coaching, nothing has specifically gone wrong in this instance. You get to decide if it's an issue or if it's a problem. But comparing your life to somebody else's life is not necessarily going to be helpful. You don't know the context of the relationship and their individual libido and sex drives. You don't necessarily know anything. So, we all have that friend that has a lot of sex all the time. But that doesn't mean that they are the standard.

In our society we also have this belief and idea that the more sex you have the better things are. And that we need to compare ourselves to others that are having a lot of sex. And that's not necessarily the case. So again, look at my forehead, nothing has gone wrong. And you are the one that decides if you want to work on this mismatched libido issue.

So, what happens if you and your partner identify that there is an issue that's impacting the relationship in terms of one person has a lower libido and the other person has a higher libido? So, if you do identify and recognize that this is impacting the relationship, okay, then it's time to discuss that, it's time to look at the situation. But first of all, you two, or three, or whomever, will have to decide what is considered normal. And then this is another question.

Who gets to determine what's normal, what is normal in the relationship? Now, very often society once again says that the normal person is the one with the higher libido. But usually this is only when it's the man. So, let's just look at this for a quick second. So, what is considered normal? It's almost based on – and this is all if you're in a heterosexual relationship. If you're in a homosexual relationship or a non-binary situation or whatever, then there's not as many rules there. But sometimes it does default to the higher, the person that has the higher libido but it doesn't have to.

But I want to just make note that when we're talking about heterosexual relationships very often what's considered normal defaults to whatever the male is doing. So, if it's a case that the man would like more sex in the

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relationship then the woman's libido is wrong and the man's libido is correct.

If it's the case that the woman's libido is higher and the man's libido is lower then somehow there's something wrong with the woman and she has too high of a libido and that's something to feel shame around. But no, I just want you to look at in the dynamics of your relationship, whose libido is considered normal and why. And who gets to say what's normal? Why is it that the lower libido is not the normal libido? Why is it the higher libido is not the normal libido?

Why is it that there's some level of compromise in between and that's the 'normal libido'? Really I'm not sure if there is a specific normal libido. But we're always chasing after and we're always looking for that normal libido. So, I also pose this question as to what exactly is normal? And you and your partner or partners get to define what exactly is normal in your relationship. So, no matter what you decide in terms of what is normal and what level you would like to strive for in terms of the number of sexual intimacy acts you'd like to have in the week, or the month, or whatever.

And I tend to talk about in a month's timeframe and not specifically in a week's timeframe. Some people will say, "Well, I'd like to have sex two and three times a week. Well, I'll expand that and I'll say, "Well, over a four week period of time then we're really talking about eight to 12 sexual intimacy sessions. And then we need to define what actually is sexual intimacy. Is it penetrative sex when somebody says they need two to three times a week? Is that penetrative sex that they're talking about? What exactly is that they're talking about?

So, there's a number of things that need to be defined. What do you consider a normal amount or a goal that you both would be interested in. And then also how exactly do you define sexual intimacy overall. But in terms of looking at the quantity some people will say, "Well, I want it two and three times a week. But it's not necessarily all about in a week basis because something could happen specifically in that week.

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I'm a doctor, there's sometimes in my schedule where I may be on call and that would be a very hectic week. Or maybe there's a project do at somebody's work so that may make it such that two and three times in the week every single week is not necessarily going to work. So, I look more so over the course of a month and say, "Okay, so you two or three are interested, or one, or one are interested in engaging in some sort of sexual intimacy eight to 12 times in the month." So, look at it in terms of the month as opposed to the week because there is more flexibility if you do it that way.

But whatever you decide works for you in your relationship, if you're solo partnered, or if you have other partners or partner, then you get to decide what is the level or the number that you would like to attain, your goal. Whatever you decide do it from a place of not having that blame, that shame, that guilt because so much of this mismatched libido that I hear when women come and talk to me, they're telling me that they feel like it's their duty, they need to engage in sex more. They have to meet the needs of their partner.

So, these are the things that they're saying and it's coming from a place of shame because they feel there is something wrong with them. Or it could be coming from a place of blame if they have the higher libido and they're frustrated that their partner's not engaging in sex and sexual intimacy. So, people come with a lot of shame, and blame, and guilt, those emotional bullies.

So, whatever you decide try to come from a place of respect, respect for yourself and respect for your partner. And kind of neutralize the situation and take this blame, and shame, and guilt out. Because it's hard to achieve anything and head in a positive direction if you're still resentful, and angry, and frustrated, and blaming each other, or coming from a place of shame.

So, if you're going to have this conversation or deal with this issue then try to come from a place of non-judgment and just recognize, yeah, this is a neutral situation and it can be changed, just like all other situations I have

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dealt with. Even though it's dealing around the issue of sex and that tends to be charged a little bit more, it does not necessarily have to be.

And then if we're talking about shame and blame, so many women come to me with this tendency to blame themselves. Maybe the sexual intimacy has changed, maybe it has decreased on their partner's part. And they are interpreting that as something being wrong with them. And so, for the women that are dealing with having the higher libido and their partner is not as interested in sex and sexual intimacy, then I see this happening a lot where they start telling me, they've come up with a number of reasons.

They'll be like, "Well, I've gained some weight so I'm just not as attractive anymore." They'll be like, "My partner's probably having an affair with somebody else." They have a tendency to blame themselves, maybe I'm not very good in bed and their partner they had before was better. And so that's why the partner's not interested in sex. We spend a lot of time blaming ourselves and we don't necessarily have to. This is a situation in which your partner has made a decision or is acting a certain way.

And we don't control our partner and so it may be the case that things are going on in their life and that is impacting the sexual intimacy and their desire. But you don't necessarily have to jump to that place where you are blaming yourself for the situation. Sexual intimacy tends to decrease and sexual intimacy libido, desire tends to decrease in our 40s unless we start really working at this. And usually that's because there's a lot going on. So, there's many reasons for changes in our libido.

And so let me just talk in not one specific order, except for this first one. This first one seems to be the libido killer of all times, stress. I have seen stress kill libido so often for women, for men, for non-binary, for all different types of people, stress with their jobs, stress with their life situation, stress around money, whatever it is. Stress seems to be a very big libido killer.

So, some other libido killers. Decreasing hormones, you get into your 40s and 50s and your estrogen, testosterone, those hormones are decreasing

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and it does impact things. Erectile dysfunction, this I think has such a huge impact on decreasing sexual intimacy. And so often our partners will not even discuss this with us. We have no idea what's going on. Shop has just been closed up and we don't know what's happening. And we ask and we ask, and we don't necessarily get any answers.

But unfortunately, our society has built up such a thing that a man is basically, his penis and his ability to have an erection. And if he's not able to have an erection then he's not a man. And so that will shut down the sexual intimacy so fast. But we need to have a new understanding of erectile dysfunction and not to be in a place of rejecting it. But being in a place of embracing the situation and recognizing with erectile dysfunction, if you're engaging in sexual intimacy that the erection may come and it may go. It may flow in and it may flow out. It might ebb and flow.

But if we are willing to work with it and get an understanding of what the body does then you can become comfortable. You'll be like, yeah, my erection's here, it's gone for a while. It's back again. So, you figure out how to work with erectile dysfunction. And of course, you check in with your doctor, your urologist, your primary care doctor, because there's a number of things that can be done about erectile dysfunction.

And no matter what, you do need to check in with your doctor when it comes to erectile dysfunction because that is an indication that there may be some underlying cardiovascular issues. The number one reason for erectile dysfunction is underlying cardiovascular abnormalities that need to be dealt with. And this, it affects the penis first because the vessels are the smallest there. So, if we're getting a narrowing of the vessels because of atherosclerosis or something like that then we need to be aware of it and do something about that.

So erectile dysfunction is something that's very important and something that does need to be looked at and addressed just to make sure there's not cardiovascular abnormalities. Medications, medications that we're taking for chronic conditions, especially mental health issues going on and maybe

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the use of SSRIs, that can decrease libido as well. The context of the relationship, if there's poor communication, if there's not respect within the relationship, this can also decrease libido. Other chronic health concerns such as diabetes.

These are things that we need to look at, perimenopause, menopause, there's male menopause too. So, their testosterone could be tanking as well. Genital urinary syndrome of menopause, that leads to infections, and pain, and atrophy. Those are impacting. And if you're going to have pain with sex you're not going to be as interested in sex. So that also needs to be dealt with and checking in with your doctor about that.

Lack of lubrication, that kind of goes under GSM issues and perimenopause, menopause issues but that's also something, you can add a lubricant in. If there's pain with sex, vaginismus or whatever, that also is going to impact and people are going to be less interested in engaging in sexual intimacy.

Overuse of pornography, also something to think about. If you're getting your dopamine hit from pornography overuse then you may not need or want to engage in sexual intimacy. The same with high masturbation rates, if you're masturbating and self-pleasuring quite a bit, you may feel like that's good enough and you don't necessarily need to be engaged in sexual intimacy.

If there's performance anxiety, that's another reason that we get this decreased libido going on. So, if we're concerned that we're not going to be able to perform in bed, men, women, anybody, this is also a reason that we get decreased libido. Obesity could be health wise immobility, but it could also be poor body image, so obesity affects us in many different ways. Now, obviously it's important to get the mobility issues dealt with, and the health issues dealt with. You can have a positive body image at any size.

And so that would be something that I would love to work with you on because our bodies are amazing. And there's a myth in society that there's

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one standard of beauty, one standard of sex and sexuality and being sexy. But that is not the case. But as I said before, if there is poor communication or connection within a relationship that's definitely a problem.

Here's one that I've heard again, and again, and again from men, that it is a protective mechanism. They have a decreased interest in sex because maybe previously they have been asking again, and again, and again for sexual intimacy and been rejected so often that they just shut down. It's like the not wanting to put your hand on a hot stove. They've been rejected so much that they don't want to even try and engage. And they are interpreting the rejection as a rejection of them. And maybe they don't necessarily know what all the issues were, but they're also projecting it up on themselves.

Or vice versa, if you have been requesting sex and sexual intimacy and been rejected so often, you might get to the place where you don't even try anymore. So those are causes of low libido. Causes of high libido, it's interesting, there's not as much information out there about causes of high libido as such that the high libido is not necessarily the problem, that low libido is the problem. So, let's look at this. But there are different reasons.

Some people might react to stress by wanting to engage in a lot of sexual intimacy and sex just in general. It's how they avoid anger, stress, depression, whatever it is. They may be using sex as a tool to buffer. Hormones, if our hormone levels have increased for some reason, that might be a cause of high libido. Imbalance in neurotransmitters, with dopamine, serotonin and other neurotransmitters. That might bump up our libido. If we're exercising a lot, that could actually lead to a higher libido.

If there is mental health issues like bipolar, some of these mental health issues can actually lead to increased libido. Maybe you have been taught that sex is the only way you know how to connect with another person. And so therefore sex becomes kind of a substitution for general intimacy. So that might be a reason why there is a high libido. But in either case it's always important to start with a physical examination if you're concerned that there might be an underlying physical cause going on.

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So, we've looked at some causes of low libido, some causes of high libido. And if you make that decision that mismatched libido is a problem then it's about having a conversation about this. And this is what I hear the most from my Diamonds, they've already had the conversation. They've had so many conversations that they don't even want to have a conversation anymore. If you want to work on this issue it will require communication.

I don't know how the conversations went in the past but if there is anger, frustration, shame, and blame, and guilt, avoidance of the topic where you're talking but you're not exactly talking about it. Then there could be a lot of conversations that were had which do not necessarily lead to improvement in the situation. Now, I believe I have an episode on having a difficult conversation. And I'm going to just talk a little bit more about that and kind of just do a quick synopsis of it.

So, you get to decide how you want to deal with this conversation, recognize that it's actually not a one and done conversation. But it's actually several conversations that will be had over a period of time. And sometimes things will improve and sometimes they won't necessarily improve right away but that is not a reason to stop, recognize that it is going to take some time to figure it out. It will be more than one conversation. How do you want to show up in this conversation?

Do you and your partner want to set intentions? Do you want to focus on respect? Do you want to focus on taking turns talking and listening, and really hearing what the person says? You get to decide. Maybe you are going to make a decision that you both have to be well rested, and fed, and relaxed, and obviously you're not going to solve the entire problem in one conversation. But you're just going to explore it a little bit. You get to decide how you want to approach this situation and how you want to approach having this conversation. So that's kind of just a little start to it.

So above all don't blame yourself, don't blame your partner, don't guilt your partner. If there's frustration and resentment, talk about that but in a respectful manner. Journal on it if you need to journal on it. You get to

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decide if this is even a problem. But if it is a problem then yeah, focus on the solution, get solution oriented, talk about things. Recognize how you want to think about things. It may be the case that you want to decide to think that this is just a normal part of our relationship. Or you might want to think, okay, this is something I can work on, we can work on this together.

Great, this is something that we can work on together, which is going to make our relationship even better and bond us together. So, you get to determine how you want to think about this situation. And you get to determine how you want to work on it. But recognize it's not something that happens all at once. And if you're concerned that there's underlying health issues going on then make sure to go talk to your primary care doctor, or urologist, or whomever.

Alright, Diamonds, that's all for this week. And next we are going to talk a little bit more about what you do in the meantime while you're working on this mismatched libido issue. Okay, I will talk to you soon, Dr. Sonia out.

Diamonds, how is your sex life? No, really, how is your sex life? On a scale of one to ten how would you rate it? You know I'm all about the intimacy for women in midlife. If you rated the passion in your life as less than an eight then we need to talk, sister. I'm personally inviting you to check out my new program, Your Empowered Sexuality 30 day kick starter. I am so excited about this program. Most of you know that I have an impossible goal to positively impact the sex lives of over a million women. And I am just getting started.

Come work with me for 30 days to kick start that intimacy in your life. Let's create that amazing, satisfying, intimacy that you deserve. Let's face it, if you're in your 40s, 50s or 60s, you could have 30 to 50 more years of intimacy ahead of you. What do you want that intimacy to look like? Let's get real and talk about what's going on with your body, your libido, let's see what we can do to kickstart this intimacy. This program is for you whether or not you have a partner.

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If you are a woman who wants to enjoy all aspects of her life then this is the program for you. It finally gets to be your time. So, click on the link in the show notes or on my website at [soniawrightmd.com](http://soniawrightmd.com) and come join me for Your Empowered Sexuality aka YES, Your Empowered Sexuality 30 day kick starter. I cannot wait to see you Diamond, talk to you soon. Take care.