



Prevalence of female anorgasmia in Delta Egypt

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Abstract: Objectives: The present study is to know the prevalence of female anorgasmia in Delta Egypt. We aimed to assess the problem in addition to encourage other studies. **Background:** Anorgasmia is the recurrent inhibition of female orgasm following normal sexual excitation and associated with marked stress and interpersonal difficulties. Anorgasmia including lifelong anorgasmia that never reach orgasm, acquired anorgasmia used to have orgasms but recently couldn't reach orgasm, there's also situational anorgasmia. **Patients and methods:** This cross sectional study included 200 Egyptian females in Delta Egypt from October 2018 till October 2019. **Results:** In the present study prevalence of anorgasmia in females in Delta Egypt was 45% and the most common cause was dyspareunia 45%, then lack of enough time 20%. In the present study 59.5% of the participants faked orgasm and only 39.5% not faked orgasm. The commonest causes to fake orgasm was to satisfy the husband then to end the coitus rapidly and found that 38% of participants reached orgasm by manual stimulation but penile thrusting was 27%. Rear entry was the commonest position to reach orgasm in 41% of participants and man on top position 36%. Most of the participants considered that intercourse without orgasm is a failure. **Conclusion:** In the present study high percentage of the participants could never reach orgasm and the commonest cause was pain. Most of the participants faked orgasm to satisfy their husbands. Large percentages of women considered intercourse without orgasm is a failure.

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Key words: Anorgasmia, Delta Egypt, Orgasmic Disorders, Sexual Function, Satisfaction.

1. Introduction:

Orgasm is the sudden discharge of accumulated sexual excitement during the sexual response cycle, resulting in rhythmic muscular contractions in the pelvic region characterized by sexual pleasure. orgasms are often associated with other involuntary actions, including vocalizations and muscular spasms in other areas of the body, and a general euphoric sensation heart rate [1]. Female anorgasmia is a primary or secondary situation where a women experiences a persistent or recurrent reduced intensity, delay, infrequency or absence of sexual orgasm following a normal excitement/arousal phase with adequate stimulation [2].

2. Patients and methods:

This cross sectional study was done on 200 females who went to different clinics in different governments in Delta Egypt, from October 2018 till October 2019. We excluded literacy to achieve privacy and accuracy of the questionnaire. In the present study excluded pregnant and lactating women in addition to many chronic illness that affect sexual activities as (diabetes mellitus, hypertension,

cardiovascular disorders and renal diseases.), excluded male sexual dysfunctions as erectile dysfunction and premature ejaculation also exclude females using medications that might affect sexual functions as (antidepressants, antihypertensives). All patients were subjected to formal consent that they were healthy and freely accepted to fulfill the questionnaire. The questionnaire consisted of questions about demographical in which we asked about age, age of marriage, residence, educational level, questions about female sexuality were assessed in our study by Arabic translated version of FSFI questionnaire which is a brief, multidimensional, validated tool for assessment of FSF during sexual activity. According to the FSFI, a 25-item questionnaire sexual function domains consisted of: sexual desire, lubrication, orgasm, satisfaction and pain during sexual activity/intercourse. Sexual desire was assessed as frequency, asked about lubrication frequency, maintaining of lubrication until complete intercourse. Orgasm was assessed as frequency, difficulty to reach orgasm and satisfaction, positions to reach orgasm, two questions about faking orgasm, prevalence and

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why, question about pain and another question about prevalence of circumcisi,. in addition to asking about

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the frequency of the sexual intercourse and if it is suitable or not. Results were collected and entered to the computer using SPSS (Statistical Package for Social Science) program for statistical analysis.

3. Results:

In this study (70%) of the participants were circumcised, (30.5%) of the participants feel sexual desire once daily, the most coital frequency was once per week (60.5%) which was suitable for (41%) of the participants. In the present study (57.5%) felt vaginal lubrication in more than half of intercourse times and (20%) were found to maintain lubrication for less than half of intercourse time in (58.5%) of participants. Dyspareunia was found in (51.5%) of participants (Table 1).

Among the participants (45%) could never or rarely reach orgasm and this distressed (50%) of them, it is very difficult to reach orgasm in 45.5% of the participants and (56%) take long time to reach orgasm. Most of the participants reach orgasm during after play. (Table 2)

In the recent study (60.5%) of participants faked orgasm mostly to satisfy their husbands. The commonest causes for failure of orgasm were pain during intercourse and have not enough time of foreplay as reported by 45%, 20% of participants respectively. Manual stimulation was found to be the commonest method to reach orgasm in (38%) of the participants and the most common positions to reach orgasm were rear entry and Man on top as reported in 41% and 36% respectively. (Table 3)

Table (1): Circumcision and female sexual functions in our participants.

Q		No.	%
5	Are you circumcised?		
	Yes	140	70.0
	No	60	30.0
6	Coital frequency is approximately		
	Daily	2	1.0
	2-3times/week	26	13.0
	Once/week	121	60.5
	Once/month	24	12.0
	Less than once/month	27	13.5
7	Is this frequency suitable for you?		
	Yes	82	41.0
	No I need more	67	33.5
	No I need less	51	25.5
8	How many times do you feel sexual desire?		
	Once/day	11	5.5
	2-3/week	60	30.0
	Once/week	61	30.5
	Once/month	45	22.5
	Almost never	23	11.5
9	How many times do you feel vaginal lubrication during the sexual act?		
	Almost all times	45	22.5
	<50% of times	40	20.0
	>50% of times	115	57.5
10	How often do you maintain lubrication until complete intercourse?		
	Almost all the times	45	22.5
	>50% of times	38	19.0
	<50% of times	117	58.5
11	Do you experience pain during the sexual act?		
	Yes	97	48.5
	No	103	51.5

Table (2): Different aspects of orgasm in our study

Q		No.	%
12	During the past 3 months how often did you reach orgasm?		
	Almost all times	30	5.0
	>50% of times	31	15.5
	Less than 50% of times	49	24.5
	Rare or never in most of the times	90	45
13	If rare or never reach orgasm, did that distress you?		
	Yes	45	50%
	No	45	50%
14	How long does it take to reach orgasm?		
	Short time	28	14.0
	Moderate time	60	30.0
	Long time	112	56.0
15	How is it difficult to reach orgasm?		
	Not difficult	30	15.0
	Slightly difficult	79	39.5
	Very difficult	91	45.5
16	When orgasm is achieved?		
	During foreplay	43	21.5
	During intercourse at the same time as your husband	22	11.0
	During after play	135	67.5

Table (3): characteristics of orgasm in our study.

Q		No.	%
17	Do you fake orgasm?		
	Yes, in <50% of times	84	42.0
	Yes, in >50% of times	37	18.5
	No	79	39.5
18	Why do you fake orgasm?		
	I want to rapidly end the coitus	62	31.0
	Husband will insult me	0	0.0
	Husband will try to find another partner	1	0.8
	I want to satisfy my husband	137	68.5
19	If you did not reach orgasm the cause is?		
	Feeling tired	30	15.0
	Pain during intercourse	90	45.0
	Husband ejaculates too quickly	19	9.5
	Have not enough time of foreplay	40	20.0
	Not interested	21	10.5
20	Do you reach orgasm by?		
	Manual stimulation	76	38.0
	Penile thrusting	54	27.0
	Manual stimulation during intercourse	70	35.0
21	Orgasm is more in which position?		
	Man on top	72	36.0
	Woman on top	26	13.0
	Rear entry	82	41.0
	Side to side position	20	10.0

4. Discussion:

This study was performed to know about prevalence of anorgasmia in females in Delta Egypt,

worldwide it is now increasingly recognized that sexual health is important for better Life.

We used female index that has been used and / or validated in several population demonstrating a high

degree of precision in the diagnosis of female sexual dysfunction.

The result of this study showed that the prevalence of anorgasmia in females in Delta Egypt was 45%. The present study was in agree with study in Nigeria among women aged From 15-49 Years, indicated that 55% of the participants showed anorgasmia or orgasmic disorder, the high prevalence in the Nigerian study was due to including all orgasmic disorders (delay and lack orgasm), in contrary to other study in Brazil among women 18 years or older the prevalence of anorgasmia was 21 % this lower prevalence may due to sexual education, awareness about the sexual problems and medical advices, **salary (3)** in a study in Yazd - Iran found that the prevalence of anorgasmia was 27.9%, this was disagree with the present study and this is almost due to social, religious and cultural factors. Most of the participants were 20- 29 years old and most of them married in the same age group. **(3)**

In the present study 40% living in a city in addition to 46.5% of the participants well educated.

The commonest frequency as regarding coital frequency was once weekly (60.5%) and that was suitable for 41% of the participants, most of them also felt sexual desire once weekly 30.5% in addition to 70% of the participants were circumcised, this agree with **Elnashar and Ibrahim et al. and Younis et al. (4)**

About the vaginal lubrication, 57.5% felt vaginal lubrication in more than half of times during the sexual act but 6% only were found to maintain lubrication for more than half of intercourse times and 58.5% of the participants can maintain lubrication for less than half of intercourse times, this result agree with **Herbanic et al. [5]**, who found that 65% of women suffering from insufficient vaginal lubrication during the intercourse. In the present study 48.5% of the participants suffering from dyspareunia. **(5)**

During the past three months 45.5% of the participants rare or even never reach orgasm, 50% of them were distressed about that and 15% only could reach orgasm in each intercourse, this is agree with **Luman et al., and Ibrahim et al. [6]**

The commonest cause of failure to reach orgasm in our study was dyspareunia 45 %, and lack of enough time of foreplay 20%, feeling tired (15 %), feeling not interested 15 % and premature ejaculation of husband (9.5%). The present study agree with **Abd El Rahman et al. [7]** that pain was the main cause of anorgasmia or failure to reach orgasm, but disagree with that lack of interest was of the commonest causes in failure of orgasm. **(7)**

Younis et al. (4) found that the commonest cause of reaching orgasm was being not interested (28.2%), feeling tired (23.9%), lack of time for foreplay

(20.7%), pain during coitus (13.6%) and premature ejaculation of the husband (13.6%). **[4]**

In the recent study 18.5% of the participants only faked orgasm in more than half of times, 42% also of participants faked orgasm but less than half of times, this agree with **Kaighabadi et al. [8]** but only 39.5 % of participants not faked orgasm if they failed to reach orgasm. The most common cause to fake orgasm was to satisfy the husband then they wanted to end the coitus rapidly. **(8)**

In the present study only 39.5% of the participants not faked orgasm this disagree with **Jern et al. [9]** who found that 66.4 % of women reported faking orgasm very rarely or never faked orgasm, but **Muehlenhard. and shippee [10]** showed that 50% of participants reported faking orgasm. **(9,10)**

The present study finding is similar to a study to **Wallin. [11]**, who found the importance of reaching orgasm to the participants and that intercourse without orgasm is a failure, this also agree with **Catherine [12]**, who found that women considered the penile vaginal intercourse orgasm was very important.

Among the participants 38% of them reached orgasm by manual stimulation, this agree with the study of **Abd El Rahman et al. [7]** that the frequency of reaching orgasm by masturbation is much more higher than during intercourse. **(7)**

Orgasm Can be achieved by different positions. In the present study rear entry and man on top positron were the commonest by 41%, 36% respectively, this disagree with **Nafzawi and colville [13]** who found that 69.7% of the participants reach orgasm by man on top position. **(13)**

Among the participants 56% took long time to reach orgasm in addition to 45.5% of them reached orgasm very difficult while 15% reached orgasm without any difficulties, so no surprise that 67.5% reached orgasm during after play.

Talat. (14) found that 38% of the participants reaching orgasm mostly by women on top position and it was the most suitable position for orgasm, women could firmly move against the base of the penis and pubic bone, friction cause stimulation to clitoris more easier. **[14]**

In the present study 10% of participants could reach orgasm more than once in the same intercourse session, sometimes 49.5% could achieve multiple orgasms, this agree with **Basson. [15]** who confirmed that women can achieve multiple orgasm if sexual stimulation is enough. Most of the participants 92% mentioned that orgasm intensity vary from intercourse to another. **(15)**

Seven% only of the participants had the sense to pee just before orgasm that might affect comfort and interrupt occurrence of orgasm.

Younis et al. [13] disagree with the present study that considered intercourse without orgasm is a failure, he found not reaching orgasm is not a failure, they considered love is more important. **(13)**

In the present study there was highly correlation between education level and faking orgasm, this agree with **Stulhofer et al. [16]** and **Maccabe. [17]** mentioned that anorgasmia is much less frequent in well educated women may due to their awareness about their body needs but in the present study found that no awareness and less sexually educated among well educated women. **(16,17)**

This study is in agreement with our expectations that the higher percentage of circumcised women led to higher percent of orgasmic disorder and difficulty to reach orgasm, this disagree with **Anis et al. [18]** who found that the desire, arousal, lubrication, and orgasm were higher in uncircumcised women. **(18)**

Conclusion:

In this study 45% of the participants could never reach orgasm that represents high prevalence of anorgasmia in females in Delta Egypt, this caused distress in 50% of them. the commonest cause for failure of reaching orgasm was pain followed by have not enough time of forplay.60.5% of the participants faked orgasm mostly to satisfy their husbands. and manual stimulation was found to be the commonest method for reaching orgasm. large percentage of them considered intercourse without orgasm is a failure.

References:

1. Netten J, Georgiadis J, Nieuwenburg A., et al., (2008). "8–13 Hz fluctuations in rectal pressure are an objective marker of clitorally-induced orgasm in women". *Archives of Sexual Behavior*. 37 (2): 279–85.
2. Redelman M., (2017). Treatment of Female Orgasmic Disorder. *The Textbook of Clinical Sexual Medicine*, pp.219–240.
3. Salary M (2005): Azad Medical University Publication. A survey on19 prevalence of sexual dysfunction in the married women in Yazd (in Persian)20 quoted from: *J Gen Intern Med*, 20 (9):819-24.
4. Younis I, Daifulla A, Salem R, Abdel Raouf S (2017): coital frequency in6 a sample of Egyptian women. *Hum Andro*, 7(2):73–83.
5. Herbenick D, Reece M, Schick V, Sanders S and Fortenberry J (2014): Women's use and perceptions of commercial lubricants: prevalence and 14 characteristics in a nationally representative sample of American adults. *J Sex Med*, 11(3):642-52.
6. Ibrahim Z, Ahmed M and Sayed W (2013): Prevalence and risk factors for female sexual dysfunction among Egyptian women. *Arch Gynecol Obstet*, 287(6):1173-80.
7. Abd El-Rahman S, Younis I and El-Awady M (2014): Female sexuality: in three Egyptian cities. *Human Androl*, 4: 5-10.
8. Kaighobadi F, Todd K, Shackelford A, Viviana A and Shackelford W (2011): Do Women Pretend Orgasm to Retain a Mate? *Arch Sex Behav*, 40: 494-501.
9. Jern P, Hakala O, Kärnä A and Gunst A (2018): A longitudinal assessment of associations between women's tendency to pretendorgasm, orgasm function, and intercourse-related pain in different partner relationship constellations. *Arch Sex Behav*, 47(3):671-9.
10. Muehlenhard C and Shippee S (2010): Men's and women's reports of pretending orgasm. *J Sex Res*, 47: 552-567.
11. Wallin P (2010): A study of orgasm as a condition of women's enjoyment of intercourse. *J Soc Psychol*, 51(1):191-8.
12. Catherine PR (2012): Female orgasm from intercourse: Importance, partner characteristics, and health. University of North Texas.
13. Younis I, El-Esawy F and Abdel-Mohsen R (2015): Is female orgasm an earth-moving experience: an Egyptian experience. *Hum Andro*, 5:37–44.
14. Talaat M (2018): prevalence of orgasmic disorders in women attending Al-Alhrar Hospital, M. Sc Thesis, Benha university, p57.
15. Basson R (2000): The female sexual response: a different model. *J Sex Marital Ther*, 26 (1): 51-6.
16. Stulhofer A, Bajic Z (2005): Sexual problems of urban women in Croatia: prevalence and correlation in a community sample. *Croat Med J*, 46:45–51.
17. McCabe M. P (2009): Anorgasmia in women. *J Fam Psychol*, 20:177–97.
18. Anis TH, Gheit SA, Awad HH and Saied HS (2012): Effects of female genital cutting on the sexual function of Egyptian women. Across-sectional study. *J Sex Med*, 9(10):2682-92

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