

# **EROS THERAPY: TREATMENT OF SEXUAL DYSFUNCTION IN POSTMENOPAUSAL WOMEN NOT ON HORMONE REPLACEMENT**

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## **Purpose:**

Female sexual dysfunction (FSD) is common occurring in approximately 50% of postmenopausal women. Recent data suggest that clitoral engorgement induced by a gentle vacuum applied to the clitoris with the non-invasive, non-pharmacological Eros Therapy device (UroMetrics, Inc., St. Paul, MN) ameliorates FSD symptoms. The purpose of this study is to evaluate the efficacy of Eros Therapy in postmenopausal patients with FSD.

## **Methods:**

Subjects were postmenopausal, had FSD, and were not on hormonal replacement therapy. Study procedures included: history/physical exam; laboratory tests; Female Sexual Function Index (FSFI) rating desire, arousal, lubrication, orgasm, satisfaction, pain (full-scale score: 2-36; maximum score, 36); sexual history; Derogatis Interview for Sexual Functioning (DISF); Dyadic Adjustment Scale; and progress reports. The device was used four times weekly for three months in self-stimulation and foreplay. Outcome evaluation was done at three months. Data were tested with the one-sample Wilcoxon signed rank test, with a Holm step-down adjustment of the  $p$  values.

## **Results:**

Twenty-two postmenopausal women completed the study. The mean age was 56 years old (range 47 - 71). The main subjective measure of treatment efficacy, the FSFI, increased from a median full-scale score of 16.7 to 28.3 ( $p = 0.00005$ ). Significant improvements were seen in sexual desire, arousal, lubrication, orgasm, satisfaction, and reduced pain (all  $p < 0.01$ ). The median total DISF score increased from 40.5 to 80 ( $p = 0.00003$ ). Objective evidence on outcome gynecological exams revealed improved mucosal color, moisture and vaginal elasticity.

## **Conclusions:**

Our results suggest that Eros Therapy is associated with significant improvements in sexual function in postmenopausal women with FSD.

Schroder, M., Bieber, E. J., Mell, L. K., & Mundt, A. J. (2003). Eros Therapy: Treatment of sexual dysfunction in postmenopausal women not on hormone replacement. *Obstetrics & Gynecology*. 101(4) Supplement: 95S. [Abstract].

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