

Female Sexual Dysfunction

Female sexual dysfunction (FSD) is specific for each patient and may show itself as a decrease in the quality of a patient's orgasm, trouble with vaginal pain during and/or after penetration, as well as lowering of female sexual interest. This arousal disorder (FSIAD) includes such symptoms as absence or hypoactivity in sexual desire (HSDD). Potential medicinal options for certain categories of FSD involve hormonal and pharmacologic remedies, including tablets of Sildenafil for women.

Overview

Sildenafil citrate or SC (initially launched into the market as Viagra by the New York-based company Pfizer) is indicated for the clinical treatment of erectile issues in men. Nevertheless, the nitric oxide-cyclic guanosine monophosphate pathway (NO-cGMP) that plays the major role in penile erection and is successfully boosted by sildenafil appears to also contribute to the sexual arousal response in females.

Trouble with sexual response and functioning often accompany the menopausal transition as the female body ages and experiences a decline in ovarian hormonal secretion. This directly and negatively impacts libido. Aside from a drastic decrease in estradiol concentrations and alterations in androgen levels, existing chronic conditions and continuing courses of medications may also worsen the vascular response in genital organs. SC is meant to resolve the issue of insufficient blood supply in the clitoris and surrounding tissues.

Purpose and benefits

FSD is a multicausal and serious problem that often results in deterioration of the quality of intimate life and interpersonal relationships of both pre- and postmenopausal women.

Viagra for ladies is designed to bring FSD sufferers satisfaction with overall intimate life. It returns women the joy of sexual arousal characterized by warmth, pleasant sensations, and wetness during foreplay and intercourse. The patients achieve a higher enjoyment of penetrative orgasm, maintain sexual confidence and experience less disappointment with their sexual response.

How does female Sildenafil work?

As shown in sexually aroused male patients, the occurrence of penile erection is facilitated by nitric oxide (NO) produced at cavernosal smooth muscle sites. NO prompts the formation of cyclic guanosine monophosphate (cGMP), due to which vascular smooth musculature relaxes, subsequently engorging the penis with blood. The enzyme accountable for cGMP catabolism is called PDE-5; Sildenafil blocks the function of said enzyme leading to a higher cGMP concentration in the muscle cells and enhancing local vasodilatation of penile erectile tissues.

The human clitoral tissue has been shown to contain PDE-5. Thus far, scientific data has not agreed on how large are the quantities of PDE-5 in the human vagina, that is why SC and female Viagra analogs have not been widely applied in women. Nevertheless, many studies support the view that molecules of NO are involved in controlling the ability for engorgement and production of lubrication fluid in the vaginal tissues. Currently, tablets of SC finds application in a number of cases of FSD.

How effective is female Viagra?

In randomized clinical trials, patients received a bottle of 50 mg generic female Viagra (SC) or identical placebo pills. The trial medication was to be administered approx. 1 hour prior to intercourse but not exceeding one pill daily. The patient study dose sometimes required adjustments down to 25 or up to 100 mg.

In what followed, a greater percent of SC respondents reported improvement for intercourse attempts as compared with placebo respondents. The number of times the trial participants experienced

satisfactory lubrication, physical or emotional sexual excitement increased; a higher satisfaction with climaxes was also established. Of 94 female respondents treated with SC, 54% reported enhanced genital sensation/feeling against 43% of those receiving placebo. 39% of the same SC cohort mentioned a higher satisfaction with intercourse/foreplay against 27% of the patients treated with placebo. Finally, vaginal wetness/lubrication appeared to be considerably greater with sildenafil treatment: 82% against 64% in the placebo cohort.

Are there any side effects?

Common adverse events are usually mild to moderate in manifestation and resolve naturally. The most frequent ones include headache, facial flushing, rhinitis, nausea, and abnormal vision. Patients discontinue SC only rarely based on such adverse reactions as headache, rhinitis, nausea, anxiety reactions, dizziness, paresthesia, and/or fatigue.

Warnings

There exist no comprehensive reports or adequately-controlled studies on the effect of the medicine on a developing human embryo. We do not know yet whether SC, [Lady-era](#), Femalegra, or Lovegra can cross the human placenta. Studies on rodents have revealed no evidence of genetic defects or low natal weight even at higher doses as compared to the clinical ones. However, human studies are always required before the safety of drug use can be ascertained.

The same lack of published data is observed for breastfeeding. The ability of SC to pass into human breast milk remains unknown.

Interactions

Potentially dangerous or unpredictable in effect if co-used with SC are the following medications: ritonavir, cimetidine, bosentan, erythromycin, amlodipine, saquinavir, and doxazosin.

Summary

SC can be reliably applied in women with FSD, showing effectiveness in several ways. Patients are expected to get stimulated by erotic activity, i.e. any activity that may bring excitement or intimate pleasure, such as foreplay, masturbation, oral sex, caressing, and/or intercourse.

In general, adverse effects are not frequent and mostly appear in women who overdose the drug, or those having an increased sensitivity/intolerance to the active substance or excipients of this medical product.