

Dr. Susan Hardwick

Okay, Susan, thank you so much for joining me today. I am thrilled to have you on. Always my pleasure.

Thank you for having me. This is my subject to talk about. Yay.

And it is something my followers and subscribers have so many questions about. I would say, you know, of the direct messages I get through my social media accounts that I've been noticing that questions about menopause and how to help, someone's partner, how, let me just say that I'm going to start from the top on that one. Okay.

So yeah, I would say through my social media accounts and the direct messages that I get from people that menopause and how to help partners cope with some of the sexual changes that happen through menopause is something that's popped up a lot recently. And it's part of what made me reach out to you because I think that there is a lot to unpack around this very important topic. Well, there really is.

And I'm excited that you're getting more feedback about it because currently, and until very recently, it's just something that we haven't been talking about at all. So I'm excited to even start the conversation. And if people are starting to ask more about it, that's wonderful because there's just been this huge gap in medicine.

I'm a traditionally trained gynecologist, but moved into purely menopausal medicine, just to try to fill that gap because no one was talking about it. So thank goodness we are. Thank you for offering to spread the topic further.

Totally. And I want to hear a little bit more about your journey into this area of specialty, because I know as you mentioned that you started out just practicing obstetrics and gynecology. And then I believe as what I read in your book, that it was through your own menopause journey that you thought there's a lot to focus on here.

So can you talk a little bit about your personal experience and the transition in your career and what you do? Yeah. So it's one of those things that doesn't become that important until it happens to you. So for years I was practicing gynecology, even as a menopause specialist, I was, you know, listed on the North American Menopause Society webpage and so on, but I hadn't been through menopause myself.

And I really had a gap in understanding about what a big deal it is. And I became particularly focused in sexual wellness when I went through a period of time in my 40s when I completely lost my libido. And that was something that was new to me.

It really felt like a loss of part of myself. And I was being told by my colleagues that, oh, you know, this is just something that happens and it's just part of life and things are changing and you're getting older. And the traditional therapies that I was offering my

patients weren't helping.

And as somebody with all the resources in the world, I couldn't find anything to help myself. And so I set about on a journey to just say, look, there's gotta be something better. I don't want to live like this for the rest of my life.

And so really transitioned into just focusing on midlife wellness. And that led me to what I'm doing now, which is just a hundred percent taking care of women in midlife with a specific focus on sexual wellness, because it's just something that is so important. And there's so few people that do it.

So it was sort of interesting transition to, I, you know, I wish I could go back and apologize to some of the women that I said that when I was under 45 and was just sort of speaking from a place of having read books and things like that. But when it happens to you, it's like, holy cow, this is really devastating. It's a big deal.

Totally. I think that makes so much sense. I just don't think you really understand what it's like until you've gone through it yourself.

And it's so interesting, I think just in the field that historically, and even today, there's been such an over-focus on male sexuality. And I can tell you, you know, from what I see in my clients who are in midlife, there's such a high level of frustration because men have all these resources like Viagra and testosterone to help their overall sexual wellness, but women fall behind. And so what starts off as maybe kind of a minimal difference in the gap in their libido becomes very wide because now the male partners are taking all of these supplements and have different medicines to help them, but women historically haven't.

So before we talk specifically about some of the sexual changes that can happen through menopause, can you talk a little bit more generally about the role of female sex hormones on things like desire and arousal just throughout the lifespan so that we kind of have a baseline? Well, it's amazing that we don't learn anything about this. Even as physicians, our education about menopause was probably like half a day, but just to fill you in from the basics, in case you forgot, we make three hormones from our ovaries prior to menopause, estradiol, testosterone, and progesterone. And all of them are incredibly important for wellness.

But as we get closer to menopause, all of our hormones don't stop altogether. They fade out at different rates. So we may be in our early 40s even and have a drop in testosterone, which is a hormone that's very related to sexual desire.

Now that being said, I always say that our brain is our biggest sexual organ and testosterone doesn't fix an unhealthy sex life at all, but it is one of the components that leads to libido. So you could be in your early 40s with a testosterone very close to zero

and still be being told by your physician, well, you're miles from menopause. That's not what it is.

Take an antidepressant or these other very unhelpful pieces of advice that I probably have given myself. And progesterone also drops during perimenopause, those years between 40 and 50. And that also has an effect on our wellbeing.

It affects our sleep and our moods. And then finally estrogen drops at the end. That's when we stop having periods and have their traditional hot flashes, night sweats, vaginal dryness.

So a lot of us think that menopause isn't a thing until the end, but actually there's a, you know, five or 10 years before that when hormones are changing as well. So all of us know, or most of us have experienced in our 20s and 30s, if we have a healthy relationship with sex, that that's a time when we're very interested in sex often, you know, there's of course, there's plenty of people who have other things going on, but in general, if we're healthy and that's happening, we're fertile. And so just the biological reality of fertility adds to our libido as well.

So when we lose our fertility, you know, hormones are dropping all of a sudden, many of us find that our desire for sex goes away and it can be quite alarming. Like it was in my case, like I just didn't care. Like I really thought if I never had sex again, I would be just fine, which is a very scary thought.

In my case, it was almost all hormonal. Now there's certainly lots of other components as well, but it's really interesting how frequently that happens and how rare it is that we get to talk about it. And if we do talk about it to most physicians, we're going to hear something like, oh, well, that's just normal.

That's just a part of life. You know, I just, it's just, just play bridge or do whatever old people do that sex isn't something. Play bridge.

Oh my God. If any doctor ever gives you that piece of advice, please. Totally accepted idea in our culture that as we get older, especially after 50, that, that sex isn't necessarily something that we're going to participate in that much anymore.

And that's just okay. I don't think that's okay. I mean, to me, a sexual being is part of who we are.

And anytime we lose part of who we are, we're not living in our fullest aliveness. And we can have a really full and even better sex life as we get older. And myself, I'm 54 almost lost count.

I'm almost 55 finding that to be true. And I'm experiencing that with my patients and I have patients in their 80s who have wonderful sex lives. So we've got to shed that myth

and just sort of break through that cultural limiting belief that sex is just for fertile young people.

Totally. Right. Yeah.

So some of it's hormones, but a lot of it's our mindset too. And I know that's where your work comes in. Definitely.

Definitely. Let me stop you just for a second. I'm hearing a notification or a ding come through.

Do you hear that on your end? Can you just make sure every other, all the background windows are closed or if you're on your phone, maybe you can switch it to my computer. And I'm honestly not sure if I know how to turn it off because I have this computer, but hopefully it won't do it again. Okay.

Sorry. I heard that too, but hopefully. Okay.

No worries. Okay. So you said a lot of things that I think are so important and that I tell my clients as well.

One of those is that you cannot separate your sexuality from your individuality. And I think what you said is so poignant that for people who suddenly go from feeling very sexual and find that that's a very vibrant, exciting part of their lives to suddenly feeling very disconnected, that that can create feelings of depression or anxiety, or just a general loss of sense of self, and obviously have profound effects on the relationship. And we're going to talk a little bit more about that further on, but what I want to have a clear understanding on is how strong of a direct effect hormones have on desire.

Because my understanding is that, you know, we talked about testosterone and definitely testosterone, we know affects sexual desire, along with many other things. Estrogen can, loss of estrogen can cause vaginal dryness. And so, you know, if you're dry, you have trouble getting aroused.

And I can see how desire would maybe decline a little bit secondary to that. Plus just all the changes your body is going through, through menopause, you know, weight gain, fatigue, insomnia, you know, moodiness, all of those things. If you don't feel very good, you're not going to want to have sex.

And so what I want to understand, and because I want to make sure I'm telling my clients the right thing, is how much of the loss of libido is secondary to all the other changes that are happening through menopause versus a direct effect of the change of the hormones? Well, this is a time in life, and that's such a good question. I don't think anyone could tell you the exact answer, but all of these things happen around 45 to 55. Our kids are getting older.

If we have kids, they're leaving home, our marriages are changing, you know, that very high divorce rate around the age of 50, often relationships are ending, our careers are changing, our parents are getting sick and dying, maybe we're developing illnesses or limitations too, and our careers are changing. So it's this huge melting pot of change that could all be the pointer for, you know, why do I feel tired? Why do I not want to have sex? It could be written up to any of those things. And all of those things play a part.

And then we add on COVID and a possible World War III and all these other things. So there's a lot going on, and I think all of that contributes. However, if we take a person like myself, I'll use myself as an example, who is experiencing all of those things, yes, they are life situations, and optimize for hormones, she's going to feel a whole lot better.

Now, it's not a panacea where it fixes everything, we've got to work on ourselves and our relationships. And one of the things you mentioned was our body image. In the study that led to my book, that the number one thing other than hormones that reduced our libido was dissatisfaction with our body image.

And that's mostly around weight for women, other aging changes, so all of those things. But you know, we fix the things we can, I don't even like using the word fix, because you know, we're already perfect. We don't like to be fixed, but we optimize the things we can, and then sort of deal with them one by one.

But for a woman who's working on herself, and maybe she's working on her weight and doing some self discovery and working on her relationship, if she's got vaginal dryness, like you said, and intercourse is going to be painful, as mammals, we're going to withdraw from that there's there's nothing we can do that's going to make that better except for replacing the oestrogen, which is just it completely changes the picture. So I tell patients, you know, we can give you the fanciest vagina in the world, and you can have the best blood flow to your clitoris and wonderful moisture. But if your mindset isn't right, it's not going to be helpful and vice versa.

So it's a it's really the ultimate kind of mind-body holistic picture. So it's a it's a very holistic situation. Men are much more simple, we just give them a vasodilator and they're mostly good to go.

But for women, we've got to work on the whole picture. Yes, your mind, your body and and the vaginal health. So, you know, vaginal dryness from lack of oestrogen is a huge problem.

Every single woman who goes through menopause, if she does not replace oestrogen is going to experience that, I mean, really, without exception. And it's, it's devastating, it takes the fun out of it. And then if we don't have the drive, and it's going to hurt, you know, no one's going to want to do that.

Right? Where's the motivation? Well, how much of it's hormonal, you know, you could put a number on it, but some of it's hormonal. Yeah, for sure. A big part of it is, and then a big part of it's these other things.

So I think it's really important to, for physicians to understand that female sexuality is such a holistic picture. You know, it's totally, it's not just one thing, right? Or that is something that we can address pretty easily. So let's, let's, I know, let's do that first, and then address the other things as we go.

Right? And you say easily, is it simple for women to get good hormone replacement therapy? Because I mean, I feel like a lot of my patients come in, so overwhelmed by the information out there and confused about what direction to take, or they're struggling to find a doctor who really knows what they're doing. I mean, you said yourself that this isn't something a lot of OBGYNs are really trained in as part of their training and residency, and that you thought that you were, you know, competent to treat it, but it wasn't really until you went through it yourself that you realized there's, there was a lot more to know. So what questions should women be asking to make sure they're getting the right kind of care? Well, you're right.

Once you get to the right place, the treatment's very straightforward. Finding the right place might be a little bit more difficult. Unfortunately, people still hear and your clients still hear from doctors, oh, hormones cause cancer, or you shouldn't take hormones for more than five years, or don't take them at all, or different kinds of nonsense, which is based on very old misinformation.

So this is a time when we have to really step up and be advocates for ourselves and do some research. And you might have to go through a few providers and turn a few down. Don't listen to the first one if they say something that doesn't make sense.

And I've got a ton about this on my website, and you can find it in lots of other places. But the short version is for almost every patient, hormone replacement is not only safe, but it has enormous benefits for our long-term health. We could go into that for hours, but you can take hormones with very few exceptions.

And if you're told not to, you need to find somebody else because just like in every profession, some people are not educated on certain things. So look for a provider who's certified through the North American Menopause Society. That's one, like I said, I was, and I didn't know much, but at least that's a good start.

Yeah. Better than nothing. Right.

So someone who specializes in hormone replacement, and thank goodness we have Google. You can find the good providers in most places. Right.

Right. You mentioned this study that led to your book. Can you talk a little bit about the

research that you conducted? Because I found it to be really interesting and I know my subscribers will too.

Yeah. So when I was going through this phase of having lost my sex drive, and I was really unhappy about that, I started really noticing that there were a few patients that would come into my office around my age or older who had a great sex life. They'd be talking about their amazing sex life and what they've done this weekend and their lovely relationship.

And after I got over being jealous, I like started trying to pin them down and ask them questions. Like, what did they have that I don't? And I would joke with them, you know, we could draw your blood and sell it. Like, what is it that you have that other people don't? So that led me to develop a huge survey that looked at tens of thousands of women trying to isolate these women that we eventually called the sexually woke that led to the book by the same title.

So the sexually woke turned out to be a group of only 7%, which I don't want that to sound depressing, but 93% of women, 45 to 60 were not having this great relationship with sex. And I was in that 93%, but the 7% did have a lot of things that they could teach us. And I found that they had certain things in common that actually are teachable.

And so the exciting thing is that we can, we can all become sexually woke if that's something that we desire to do. It's not something just for a small group of people who were lucky or found it naturally, they'd all done quite a bit of work to get there. But the study came out of my own fascination of how to get to be like that myself.

I'm like, I want to be doing what you just said you were doing. I'm not feeling like that at all. So it was actually a fun study and I interviewed, oh, hundreds of women and have the best stories.

And so the book is largely a collection of those stories. And then at the end, trying to see what they had in common so that perhaps we could all benefit from what they had learned. Yeah.

And so what were some of the things that you found that they have in common? Well, I'm going to take hormones out of it, actually, because the book isn't about hormones. It actually turned out to be more of a spiritual book, interestingly. But the, the, the three secrets of the sexually woke to just highlight at a very high level were first that they all seem to know themselves very well.

And by that, I mean, having gone through some process of self-discovery through therapy or some other means that they felt really comfortable with themselves and felt enough came from a place of abundance, all of those things that we know so much and talk so much about that they were able to show up in the sexual relationship really as

themselves and be comfortable in their own body. They also knew themselves in the way that they knew how to pleasure themselves. So they'd done a lot of work and learning their own anatomy and what feels good.

And they were confident in communicating that. So there was a very comfortable, open flow of communication about what feels good. So that was part one, that they knew themselves first, that, you know, the whole idea that we can't be in a healthy relationship without showing up as a whole person.

And that's a giant topic, but it came up over and over again. The second one was that they all were open to possibility. They had this wonderful idea that getting older, wasn't marching to the grave, but rather they tell stories about how they were coming out of their shell or finding something new or that they were breaking through walls.

And it was, you know, if you're watching me on video, I'm doing like signs with my hand. Yeah. They didn't have this sort of, Oh, I'm getting older.

It's terrible. So the feeling they were all expressing different ways of seeing aging as an openness to this sort of great playing field of possibility where they could try different things. And, you know, the kids weren't home now, so they can play and maybe try some, they were less inhibited and more self confident than they used to be.

Yeah. I think mindset is so important. I mean, what you're describing, I think is having the difference is the difference between having a growth mindset and a fixed mindset, you know, people who have, yeah.

And I'm doing the hand motion to like open people who have a growth mindset, don't see themselves as, you know, fixed at all. They see every opportunity, every change is an opportunity for growth. And I think that's exactly what you're describing in your research participants.

And it is so interesting because these three things could be in the context of just about any facet of life. And it turned out sure enough, it also showed up in the facet of sexuality as we age. So, so they, they knew themselves and were comfortable with themselves.

They had a growth mindset or they were open to possibility about aging and not seeing it as a doom and gloom type of a situation. And the third thing was that they really approached their relationships with intention and attention. So it wasn't, oh, I've been married for 30 years and we have this fantastic marriage and it just sort of happened.

They were very intentional. And just for example, one of the things that came up in almost every interview was a ritual around coming and going like the goodbye, the saying goodbye when you leave in the morning and the, how do I greet you when you come home? These tiny little things, which any marriage counselor will tell you are part

of a healthy relationship, but they directly led to a more intimate sex life. There's just that moment of connection and being present when you leave and when you come home.

And, you know, I had patients who would have been married for 30 years and still left little sticky notes on the mirror, like, Hey, my sexy, I love your pet, you know, my, how did I get so lucky? My sexy man, or just these tiny little five second things that don't cost anything. Attention. Yeah.

They kept the relationship alive. So attention and then being very intentional so that those were the, interestingly, I was sort of looking for more sort of technical medical things they had in common, but really what they had in common was those psychological things that really all added up to presence. So a lot of it came down to just being in a place where they could be fully present with themselves and their partner.

And then from there, your sex life can go in any kind of direction. Totally. And I'm assuming you assessed for hormonal differences in your sample as well.

They didn't have necessarily higher testosterone or better estrogen or anything like that. Now I will say hormones are important. So I mentioned that I took that out of the, the three things, because that's something that anybody can easily address if they want to.

And it, you know, even if you did all of those things, if you have vaginal dryness and pain that has to be addressed. So there are some anatomic realities of aging and for men too, with erectile dysfunction and other, other things, prostate cancer, sequelae and things like that, or breast cancer treatment can lead to different anatomic changes. So there's some very real anatomic changes that we need to not forget about.

Right. However, it turned out the most important things were, yeah, we do that. Yeah.

So let's take care of those. That's sort of easy, you know, medical. Right.

By easy. I mean, yes, we can take care of those. And then let's, let's think about those bigger things like setting up rituals to greet each other in the morning and you know, just really simple things.

Like I mentioned the body image being a very important thing that played a part in lack of libido. The other one was resentment and tie that in a bucket of all the different ways that we're not completely honest about our feelings that we think might not be well received. But so I know this feeling I'm, you know, I'm super mad at you about something, but I'm not going to say anything.

And so I sure as heck don't want you to touch me physically. I'm going to turn away, but really I'm just not telling you that I'm really pissed off about the, you don't take the trash out or whatever it is. So, so clearing up that resentment and just having a, just an

understanding of being transparent and honest and the sort of radical candor idea where you just always tell the truth was something that came up a lot as well.

And using all of the ways that we know to use language wisely and doing that, not just to blurt out the truth, but to be able to tell the truth in kind, wise ways. So that works in any relationship in the bedroom. So important.

I talked to women actually been one of these women who has put up with something that I did not like sexually for years and didn't say anything. And then after a period of time, you know, when you've been married for 10 years and you've been doing this thing that you don't like for 10 years, it becomes kind of difficult to bring it up at that point. Right.

It's like, it's awkward. Right. I mean, you can, and we hope you will just, but it's a whole lot easier to do it at the beginning.

So for people in a newer relationship, it's such a beautiful opportunity to just tell the truth, Hey, this is what I like. You know, what do you like? I really like being touched like this, or I love it when you do this or, um, so for those in a new relationship, please go in with complete honesty. And if we've been in a longstanding relationship, sometimes we just have to say, you know, let's, you know, let's talk about, because that's uncomfortable for me or.

Right. And I think what's so important to remember too, is that our needs might change over time. What I always tell people is that what worked in the beginning might not work, you know, five years in 10 years in, I mean, just recently my husband and I sat down and had a conversation because we're, we're both so busy right now.

We've got two small children. And I said, I just need a little more time to get into my body before I can relax enough to be in the mood. And this is what I need from you to make that happen.

And what do you need from me? And we had a really productive, healthy conversation about that. And I'll tell you, even as a sex therapist, it's still sometimes hard to have those conversations, but it is so important. And I think it serves as a reminder that we have to be very honest with ourselves and very direct with our partner, because at the end of the day, if the sex isn't good, you're not going to want to do it.

And so having a pleasurable and satisfying sexual experience is a huge part of that. Yeah. So I, I totally agree.

And we can, we can easily frame it that way. You're right. Even if it's like, gosh, well, we've been doing this for 20 years.

How am I going to tell him now? Well, definitely because we can change in what we

need. So we could frame it that way, but I find it, and you might find this too. It's very unlikely that that information is going to be poorly received.

Partners really want to hear that. I mean, if I'm doing something that my partner doesn't like, I, you know, I really want to know that what he, what he does like, I mean, we want to be partners and there's nothing worse than being in the middle of a sexual experience, just wishing it would be over. Like I'm, Oh God, I'm not enjoying this, but how do I, how do I tell them? Cause I don't want to hurt their feelings.

And I think, you know, we have to take some responsibility for that. Like even at the most extreme level of sexual dishonesty with things like faking an orgasm, for example, which we've probably all done, so no judgment, but you know, when we do that, we're going to encourage that same behavior again. So we're really good at just own up to our part.

And that, and I have to take responsibility for my own ways that I've led my partner to believe that I like something that I don't or what have you, but just have to be honest. I mean, what it's a natural human behavior. We should talk about it.

Like, like we're eating dinner, like anything else. Yeah. Yeah.

I can't believe that only 7% of the women in your study fell into that woke, sexually woke category. I mean, why do you think that is? I personally think that so many myths around sexuality for both men and women are still very much present today, but, but what do you think are some of the reasons that such a small percentage of people were having great sex after the age of 45? Oh, well, so, so many reasons. Um, one is that in, in, you know, so the generation who is 45 to 65 now grew up in general with no education whatsoever, including me.

Um, you know, my mother gave me a book that got put on the bed and, you know, we didn't, we weren't taught anything even in medical school and residency, not taught anything. So there's this huge lack of education. Most doctors can't tell you the anatomy of the clitoris.

I mean, so how, how are we, how are we expecting anybody else to know we can't teach our patients. So most, most patients don't know their own anatomy. They're, they're not familiar with what feels good.

They haven't experienced, um, or practiced much with, uh, self-stimulation. If we're in that generation, that's very common to still think that's not something we should be very free about. Um, hormonal change is happening during that same time.

Relationships are getting older often, and, you know, we're in long relationships and patients haven't developed those communication tools to be able to sit down and have those difficult conversations, potentially difficult conversations that we were talking

about. So it's very, if you follow the path of least resistance, I think you'll find yourself frequently feeling that way. Like I did get here because it is, it does take effort and intention and, and just, it's not going to happen by itself.

Most likely the 7%, it didn't, it was very intentional. You've got to stop and say, Hey, I, we want this to get better. What, what can we do together? And we're, we're busy.

We're, we've got kids, we've got jobs. It's always the, a lot, we'll, we'll get to that later. Um, so I think that's some of the whys.

I mean, some of them are hormonal and some of them are just, we, we don't do the work. Right. Yeah.

I think people get complacent both about themselves and their own health and wellbeing, but definitely in their relationships. And, you know, I can see that a lot of people, just like you said, buy into the myth that, okay, you're going through menopause. Now your sexuality has to die as part of that.

And it doesn't have to be like that. What do you think it was that made you kind of wake up and say, this is not how I want to continue so that maybe other women can feel that same wake up call. Oh, I really think I had one of those sort of like universe reaching out to me things I wrote in my book and this literally happened.

I woke up one morning and just sat up and said, I have to do something different. Like I just knew this was more to life than this. I was starting to feel less and less whole.

And, you know, throughout my life, I've always been a bit of a spiritual seeker. I've sort of known there was something that I was put here to do. And I could see that that was going the wrong direction and just had to find a better way.

I mean, I really believe that they're getting the wisdom that comes with getting older. It gives us this incredible opportunity to make sex even better because we we've got, we know things now we know ourselves, hopefully a little bit better. And that's, of course, a lifelong project.

We've got a little bit of wisdom, we've perhaps got a little bit of time, we've got some better communication skills. So this should be the time or this could be the time when we can really make all that work rather than just letting it all go. So, yeah, I was, I was sort of struck by lightning and just that I just have to live a different life.

And it's been, it's been so amazing to be able to work with other women in this way too, and see other women be able to wake up just to find that joy back again. And sex goes from being fun to being work and dreadful to being fun again. Right.

It's the transition that can take place for anybody. It goes through cycles for sure. What

percentage of the women who come to you are there because they really want to be there and feel better versus they maybe have a partner who's urging them in because they miss the woman that they married, let's say.

Oh, you know, I have a pretty self-selected group of really educated and motivated women. So I would say almost all of them come in on their own with their, from their own motivations, but their partners benefit from it enormously. I mean, sometimes partners come in together, which is so sweet.

I saw some couples today who, you know, they just really want to learn how to make this work together. You know, the mismatch that you were mentioning, that's so such a cliché where, you know, the male partner wants to have sex more than the female definitely often drives it because it, you know, the more there's a mismatch, the more disconnected we get, you know, neither party wants to have sex. It can sort of work in some way.

You know, we hope that won't happen, but if both people do that works too. But yeah, there is this thing that happens around 45 to 55 frequently where it will appear in a heterosexual relationship. The male is going to be more interested than the female in it.

It leads to all kinds of problems that are completely avoidable as it turns out. Right. And what I. And they often, their husband comes back a couple months later and says, I can't keep up with her.

Right. Then the pendulum swings the other way. And what I always like to remind people and, you know, for anyone listening is, you know, that sexual satisfaction is so important for so many areas of our lives.

I mean, we have studies that show that people who feel sexually satisfied tend to find that their lives are more meaningful. They have healthier relationships. They tend to have better sleep quality.

They tend to have better mental health, physical health. Like there's just so much that goes into having an active and vibrant sex life. And it is not something that you have to give up.

And so I think sometimes just knowing, thinking of sexual wellness is a part of our overall health and well-being and not neglecting it. Just like, you know, you hopefully don't stop exercising because you've gone through menopause. You don't stop eating healthy just because you've gone through menopause.

I mean, all of these things you may have to work a little bit harder to do, but they are all, and sex is a part of it, an important part of our overall health and well-being. And that's so true. And I use this analogy sometimes because this is how I felt when I was in that period of time when I didn't have a good sex drive.

It is a little bit like going to the gym. Like I would force myself to do it and it would be okay. And I'd say, hey, it wasn't that bad.

I'll do it three times a week. Kind of like when you, if you're someone who doesn't like going to the gym, but then it would sort of fade off. And I wouldn't, and I happen to be someone who likes going to the gym.

So going to the gym for me is easy. So I related that to my, my partner's feelings about sex, but yeah, in the beginning, it might be something that you do have to give yourself a little push, just like when you're starting a new exercise program, because you know, it's good for you and then it's worth it. But you're in that place where it's like, oh, I just don't, I don't want to, and I don't have that desire.

I like what you said about us thinking about it as something that's part of your wellness, just like you go to the gym or start a healthy eating regimen. Once you get started, it's it, all the hormones that we produce through orgasm, we all know are so good for our sex to make us live longer. They cause physiologic changes that lower our blood pressure and help us relax and moods and sleep.

And plus it's just fun. Right. Good recreation.

It's adult play. It's a good recreational activity. Right.

I mean, and you can probably relate to this too. And your listeners can, I, when I'm in a situation where I've got this like little irritation and my partner, I'm irritated about something or we're in a kind of a mini disagreement that we haven't quite resolved. If we can just make love, it's like, oh, you know, I don't care.

What was that you wanted to talk about? It's like, oh, nevermind. Right. It doesn't matter.

It wasn't sexual healing is a thing. And it really is those little things become that, you know, they just disappear. If we can, if we can be intimate regularly, it's so much easier to just mend small conflicts and so many good things.

Totally. Well, Susan, thank you so much for joining me today. You are such a wealth of information and such a great resource.

So where can people find you, learn more about you, check out your book, where can people go? So everything starts with my main website, which is drsusan.com, D-R-S-U-S-A-N.com. And that will lead you to the book and podcast, YouTube, and my private practice, which is in Houston. So we can start there. We've got tons of great educational material to read and listen to and videos to watch and podcasts to listen to.

You can listen to my book on audiobook or where all books are sold. It's called Sexually

Woke. It's also in paper form, if people still read.

I have the paper copy, actually. I think I told you when I was scheduling the interview, my dad dropped it off at my house because he's an OBGYN. And I guess you had sent a copy to his office and he said, I think you're going to like this book.

And so that's how I first learned about you. So I have your paper copy and it's great. Well, the message is just of hope.

As old as we might be lucky to get, there's hope that we can still maintain an active and even more active and more satisfying sex life than ever before. And it's such a beautiful thing when that works and it's possible for anybody without exception. So I really hope that for everybody, because it's a wonderful way to live.

Totally. Okay. Well, thank you so much again for joining me and I hope to connect again sometime in the future.

Thanks for having me and have a great afternoon. You too.