

## Fertility, Sexuality and Reproduction After Spinal Cord Injury

**Condition:** Sexuality and fertility can be affected after a Spinal Cord Injury (SCI). Capacity for reproduction, pregnancy and awareness of labor can also be affected.

**Background:** The location and severity of a spinal cord injury can determine which aspects of sexuality and reproduction might be affected. In men, issues can include ability to achieve or maintain an erection, ability to ejaculate and impaired quality of sperm. In women, genital lubrication might be affected. Both men and women might have a decrease in sexual desire and decreased sensation in their sexual organs. In men with complete SCI and in some women with complete SCI, orgasm might be harder to achieve as well. Long-term fertility for women is usually unaffected and pregnancy is achievable. Physical Medicine and Rehabilitation (PM&R) physicians, also known as physiatrists, have special expertise in the care of people with Spinal Cord Injuries and can lead the care of SCI related issues as those discussed above.

**Risk Factors:** Approximately 93% of men with a complete upper motor neuron injury will regain their ability to achieve an erection after physical stimulation though it might be poorly maintained. In terms of lower motor neuron injuries, 90% of men with an incomplete lower motor neuron injury regain the ability to achieve an erection but those with complete injuries are less likely to achieve one. For women, those with upper motor neuron injuries have preserved lubrication of genitalia after stimulation but in those with lower motor neuron injuries it is impaired or absent. Additionally, certain medical conditions like diabetes, high blood pressure, mood disorders and certain medications can further affect sexual function.

**History and Symptoms:** It is important to discuss with the PM&R physician any other medical conditions present, any episodes of autonomic dysreflexia, current medications, prior sexual history, current relationship status and overall attitude towards sexuality as all these can affect sexual function but can also help guide the best treatment plan.

**Physical Exam:** The PM&R physician will also perform a physical exam including an International Standards/ASIA exam in which status of sensation, strength and several reflexes can be used to predict how sexual function will be affected. This can also include examination of rectum and genitals.

**Diagnostic Process:** Laboratory studies can be part of the examination and can include hormone levels and tests for infectious diseases as appropriate.

**Rehab Management:** A multi member team approach will be used for management of sexuality after SCI and can include a physician, nurse, physical therapist, occupation therapist, psychologist and recreation therapist. Several of the issues that will be addressed can include medication management and procedures, assessment of bowel and bladder function, equipment and device recommendations, counseling and community integration.

**Other Resources for Patients and Families:** There are several resources available that can be useful in addition to the education provided by the rehabilitation team. These can include a website like

(<https://pva.org/>) as well as moderated videos, and books. Involvement of significant others in the discussion is encouraged as allowed by the patient.

## Frequently Asked Questions

### **What is PM&R?**

Physical medicine and rehabilitation (PM&R), also known as physiatry, is a primary medical specialty that aims to enhance and restore functional ability and improve quality of life to those with injuries, physical impairments or disabilities affecting the brain, spinal cord, nerves, bones, joints, ligaments, muscles and tendons. PM&R physicians, known as physiatrists, evaluate and treat the whole body, maximize patients' independence in their daily life and are experts in designing comprehensive, patient-centered treatment plans to empower patients to achieve their goals. By taking the whole body into account, they can accurately pin-point problems, decrease pain, assist in recovery from devastating injuries and maximize overall outcomes and performance with non-surgical and peri-surgical options. To learn more, visit [www.aapmr.org/aboutpmr](http://www.aapmr.org/aboutpmr).

### **What makes PM&R physicians unique?**

PM&R physicians' training focuses not just on treating medical conditions, but on enhancing the patient's performance and quality of life in the context of those medical conditions. They focus not only on one part of the body, but instead on the development of a comprehensive program for putting the pieces of a person's life back together – medically, socially, emotionally and vocationally – after injury or disease. PM&R physicians make and manage medical diagnoses, design a treatment plan and prescribe the therapies that physical therapists or other allied therapists perform or that are carried out by the patients themselves. By providing an appropriate treatment plan, PM&R physicians help patients stay as active as possible at any age. Their broad medical expertise allows them to treat disabling conditions throughout a person's lifetime.

### **Why see a PM&R physician?**

A PM&R physician will thoroughly assess your condition, needs, and expectations and rule out any serious medical illnesses to develop a treatment plan. By understanding your condition and goals, you and your PM&R physician can develop a treatment plan suited to your unique needs.

### **How do I find a PM&R physician near me?**

Visit [www.aapmr.org/findapmrphysician](http://www.aapmr.org/findapmrphysician) or contact your primary care physician for a referral.