25TH Annual Fall Scientific Meeting of SMSNA

October 17-20, 2024 • Scottsdale, AZ

Novel Therapeutic Approach for Vaginismus: A Case Report

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Introduction

Vaginismus is a condition characterized by involuntary muscle spasms in the pelvic floor muscles, leading to pain, difficulty, or impossibility of engaging in sexual intercourse, undergoing gynecological examinations, or inserting tampons. It manifests in various forms, with symptoms varying among individuals. Pain severity ranges from mild to severe, significantly impacting the quality of life of affected women, often leading to avoidance of sexual intercourse and relationship establishment. While different types of vaginismus may affect women of various ages, primary vaginismus constitutes a permanent condition where pain has always been present during attempts to insert a tampon or initial sexual encounters, and making gynecological examinations challenging. Current treatments typically involve a combination of techniques, often requiring partner involvement, such as Systematic Desensitization.

Aim

This case report aims to assess the utility and safety of a novel therapeutic tool that could benefit single patients suffering from this condition.or equivalent.

Method

A19-year-old nulliparous woman without a stable partner was referred by gynecology with a diagnosis of genito-pelvic pain disorder/penetration disorder according to Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-5) criteria. Despite maintained arousal reflex and libido, she exhibited an avoidant pattern of coital relationships due to penetration pain, severely affecting her ability to engage in sexual intercourse and establish romantic bonds. The patient underwent an 8-week treatment protocol, starting with instructions for progressive vaginal exploration, three times per week, at home, using a flexible vibrating dildo device called Molto. The device was preset to vibrate at 50Hz for 10 seconds on and 10 seconds off to promote genital vasocongestion. Improvement was assessed using the pain domain of the Female Sexual Function Index (FSFI), the Patient Global Impression of Change (PGIC) questionnaire, and the number of coital relationships from the 4th week onwards.

Molto website

Figure 1. Molto .This device is designed to mimic the width of one finger, adapt to the vagina and stimulate precisely where needed. Gently and slowly insert.

Results

The FSFI pain domain score increased from 0 to 4.8 (range 0-6), indicating significant relief with treatment, as corroborated by the patient's response on the PGIC questionnaire ("much better"). Additionally, the patient reported five coital relationships from the 5th to the 8th week, suggesting treatment utility and improved quality of life.

Figure 2. Females Sexual Function Index (FSFI) Domain Pain. Pre-treatment and post-treatment scores after 8 weeks of treatment.

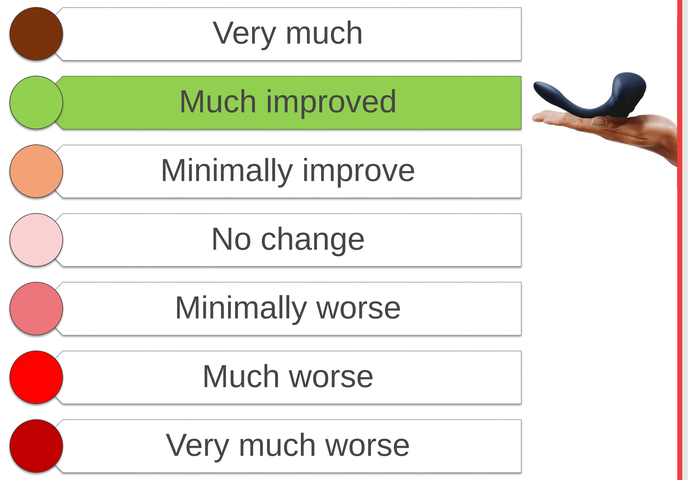

Figure 3. PGIC . Patient Global Impression of Change (PGIC) questionnaire response after 8 weeks of treatment.

Conclusion

While these findings require validation in case series and randomized clinical trials, this individualized vibratory device therapy offers several advantages, particularly its suitability for patients without stable partners, requiring fewer consultations compared to conventional treatments. This innovative approach represents a promising avenue for addressing vaginismus, providing a tailored solution for individuals who may not have access to, or benefit from traditional therapies. Further research is warranted to establish its utility and safety conclusively and to explore its potential for broader application in clinical practice.

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Safety and Preliminary Outcomes of a Vibrating Constriction Ring for Psychogenic Erectile Dysfunction

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Introduction

Psychogenic erectile dysfunction (pED) is an increasingly common reason for consultation. While performance anxiety is the main cause, other psychosocial and relationship factors often coexist. Current treatments are not well standardized and range from simple sexual advice, reeducation, and cognitive-behavioral therapy, which are sometimes combined with first-line medications. There is a group of patients who cannot undergo these therapies due to economic reasons, accessibility issues, or lack of cooperation from their partner, and are also reluctant to use medication. For this group of patients, and thanks to technological advancements, there are erection aid devices that can be of clinical use.

Aim

The aim of this study is to determine the safety and efficacy of a new vibrating constriction ring designed to help produce and maintain erections in patients diagnosed with psychogenic erectile dysfunction.

Method

Nineteen sexually active men diagnosed with pED based on criteria for Erectile Disorder from the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) used the vibrating constriction ring over 8 weeks. The patients had an educational session where instructions for using the device called Tenuto Mini during coital relations was provided. The device was controlled via a mobile app and delivered focused mechanical vibrations (FMV) in intervals of 10 seconds of vibration followed by 5 seconds of pause, with a vibration frequency of 50Hz. Previous evidence suggests that this intermittent frequency pattern produces a vasodilation effect. Additionally, the device applied strong constriction at the base of the penis, leaving the area around the urethra unaffected. The five-item Spanish version of the International Index of Erectile Function (IIEF-5) questionnaire was used to assess symptoms before and after the treatment and the Erectile Dysfunction Inventory of Treatment Satisfaction (EDITS) questionnaire was used for evaluating satisfaction with treatment.

Figure 1. Tenuto Mini and MysteryVibe App with a preconfigured vibration pattern of 50 Hz delivered in intervals of 10 seconds of vibration followed by 5 seconds of pause .

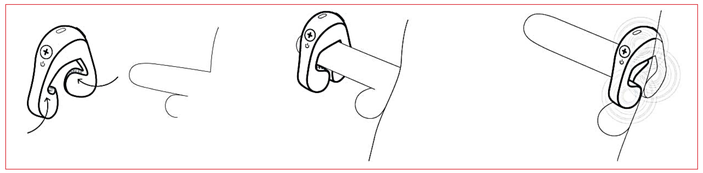

Figure 2. Tenuto Mini Guide . Visual instructions for using medical device during intercourse.

Results

Patients had a mean age of 37.21 ± 4.77 years. A significant improvement was observed in the average IIEF-5 scores at eight weeks using the device (10.95 ± 1.87 vs. 19.56 ± 2.19, p = .001).

The mean EDITS index score at the end of the treatment was 76.97 (range 61.36-86.36). No adverse effects were reported during the treatment.

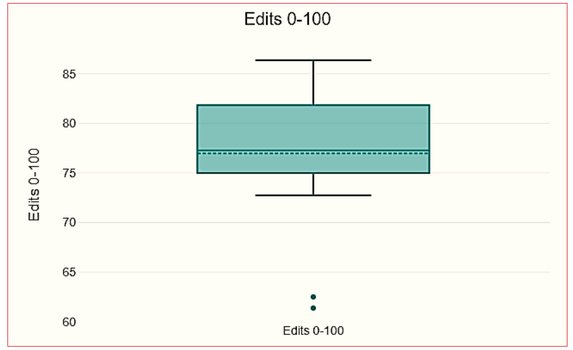

Figure 3. Inventory of Treatment Satisfaction (EDITS). Scores at the end of the treatment .

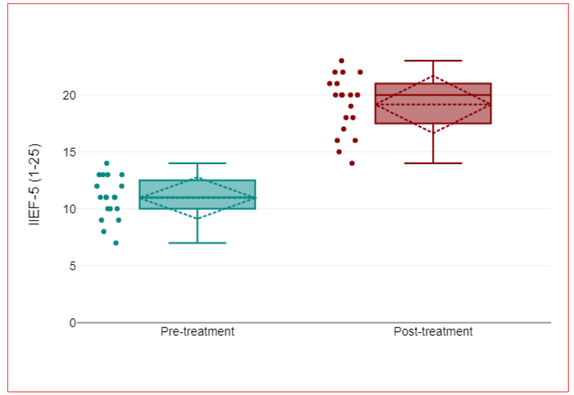

Figure 4. IIEF-5 .The five-item Spanish version of the International Index of Erectile Function scores was used to assess symptoms before and after the treatment .

Conclusion

The use of a vibrating constriction ring with a specific pattern of focused mechanical vibrations (FMV), combined with a constriction effect can be beneficial in managing pED. An added advantage is its applicability even when couple-based sexual therapies or use of medications are not feasible. Further validation through randomized controlled trials is necessary to confirm these findings.

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Efectos de la Vibración Mecánica Focalizada Con Diferentes Frecuencias e Intervalos en Disfunciones Sexuales Femeninas

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Introducción

La etiología de las disfunciones sexuales femeninas (DSF) abarcan una compleja variedad de factores fisiológicos, psicológicos e interpersonales, lo que la convierte en unos trastornos multifacéticos. La comprensión actual de la fisiopatología de la DSF es limitada. Los vibradores portátiles gozan cada vez de mayor popularidad en el mundo y son comúnmente utilizados y recomendados por algunos clínicos para mejorar la excitación y facilitar el orgasmo. No obstante, no existe evidencia a cerca de su eficacia o de los mecanismos de mejora que subyacen a sus supuestos beneficios. La evidencia actual sugiere que las frecuencias, duraciones y amplitudes de la vibración mecánica focalizada (VMF) desencadena una amplia gama de efectos fisiológicos a nivel vascular y neuronal, como la vasoconstricción, la vasodilatación, la analgesia, la relajación muscular y la activación muscular.

Objetivo

El objetivo es realizar una revisión cualitativa a cerca del uso de dispositivos vibradores en el ámbito de la salud sexual femenina, en relación a la posible existencia de protocolos de uso, tipos de frecuencias utilizadas y eficacia de los mismos.

Métodos

Se buscaron estudios en los últimos cinco años que exploren las experiencias en el uso de dispositivos vibradores para el tratamiento de mujeres con disfunción sexual que incluyeran protocolos de actuación y especificaciones a cerca de los patrones de vibración de los dispositivos y que hayan sido publicados en inglés. Dada la escasez de artículos se incluyeron abstract presentados en congresos internacionales.

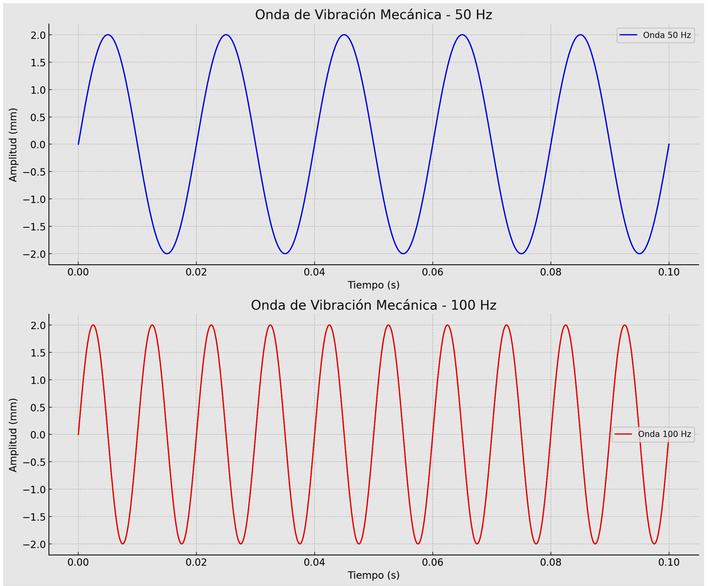

Figure 1. Mechanical vibration patterns used in studies to improve sexual function.

Resultados

Un estudio de 2023 usando una gama de frecuencias de 70-110Hz con el dispositivo Crescendo II® en pacientes con anorgasmia coital demostró mejoras significativas en el dominio de Orgasmo del FSFI a las seis y doce semanas (pre: 1.62, post seis semanas: 3.47, post doce semanas: 3.43), con una tasa de éxito del 90.47% en la consecución del orgasmo durante el coito. En ese mismo año un estudio tras 12 semanas de uso del dispositivo Crescendo®, encontró un aumento significativo en los puntajes de Excitación y Lubricación del FSFI, sin efectos adversos reportados. Las frecuencias de vibración empleadas fueron en esta ocasión de 50Hz con una amplitud de 2mm en intervalos de 10 segundos de vibración seguidos por 10 segundos de pausa.

Figure 3. Crescendo II Device. Device used in both studies reviewed.

Conclusiones

Los hallazgos subrayan la importancia de seleccionar adecuadamente las frecuencias de vibración para obtener resultados óptimos. Se requieren estudios controlados aleatorios más amplios y de mayor duración para confirmar plenamente el potencial de estos dispositivos y su impacto en las disfunciones sexuales femeninas.