Introduction to pleasure and menopause

Hi, ladies. Welcome back to Mastering the menopause transition. I'm your host, Dr. Sharon Stills. Pleasure. Pleasure. Pleasure to see you here today. And we're going to be talking about pleasure X shortly.

So each has a good word. I wasn't even thinking about it till I said it. And I was like, Oh, pleasure. So this is going to be the pleasure talk. So if you're on the shy side or you're not used to talking about sex or masturbation or orgasms or anything like that, you might want to put some headphones in or go in a place where you feel comfortable and can receive this conversation.

And, you know, if you're not in that place right now, then hit pause and you can catch it later. But this is a really, really important topic. And I didn't want to have this summit without really going here again because it's so very important.

The topic of masturbation, of sex, of orgasms, of pleasure, of just feeling good with yourself. And one of our sponsors is Mystery Vibe, who makes these really fun, fun toys that are also like medicinal.

And so they they are awesome. They have an awesome doctor who works for them. Dr. Harper. She's on there. I think they're advisory board and she is a big voice if you check her out on Instagram in the menopause space.

And so I'm excited too, because I'm like, Oh, I get to talk to her today and ask her all these questions about one of my favorite topics. So she's got this lovely accent because she's from England, and so I am just thrilled to have you here.

I am going to I forgot to ask you before we went live, I'm going to have to ask you to say your first name for me so I don't butcher it. If I use it here, I'll just call you Dr. H.

So it's really lovely. Thank you for taking time out of your busy schedule to to be here and to have this conversation with the women who are listening.

Oh, thank you, Sharon. So, yeah, I'm Dr. Shahzadi Harper and I'm based here in London, and I'm so pleased to talk to you about a subject which often, you know, women in midlife and especially around menopause, you sort of shy away from or they find that their sex life, their libido has fallen off a cliff.

Why masturbation and orgasms matter

So I'm a medical doctor and in the UK we called GPS the ones that sort of family medicine, but about sort of maybe eight or nine years ago, I really sort of took it upon myself to become that menopause expert.

I'm the eldest of six sisters, so I knew I was going to enter that phase before everybody else. I also saw how a lot of women seemed to change almost overnight, and I was single and still wanting to mingle and I thought, This can't happen to me.

You know, I can't this can't happen to me. And, you know, I don't I didn't understand why we couldn't have a fulfilled sex life or if we wanted to. You know, it's about choices.

And for me, it's very much about women having choices, having options and not being forced into one route or the other route. So that's why as part of my menopause and perimenopause consultations, I talk a lot about sex, libido, energy, stamina.

And this is how I got to meet, you know, the Mystery Vibe team, because I was looking for a way to get help

women to get their mojo back, to get their, you know, sort of to get them feeling sexy and confident and to get that mind body connection going.

I one of the beauties about the mystery vibe, vibrators and sex toys is, you know, they are medical devices. So I'm very much about you getting your mojo back on your own first and masturbating self-pleasure.

But you know, it's not just about sort of creams and lotions and potions. It's about getting that awareness back in your body, reconnecting and reigniting those the mind and the body connection before you go into a couple play or partner play.

So I think, you know, masturbation is really healthy. It's not it shouldn't be seen as a dirty word. And even if I don't know about yourself, Sharon, but if I think about my upbringing, you know, which was a very traditional Muslim upbringing, it would not have been part of the conversation.

It's not something you get taught about at school, medical school. And yet here I am now with my patients, sending them away with a prescription to links of ethical porn sites, you know, apps, erotic apps that they can hear and teaching them how to use a sex toy.

Mm. I love you already. I, I couldn't agree more with everything you said. And. Yeah, you know, I was raised in New York, a nice Jewish family, but we didn't we didn't talk about these things.

I don't know. I think you have to be in a real hippie, outward family where you're where you're talking about these things. And I, you know, I raised my kids as a as a hippie.

And so it was always an open conversation. And I always think to like even infants or toddlers who are exploring and touching themselves and what's the normal response?

Don't touch yourself. They're No, no, no, no, Jimmy, don't be a bad boy. Don't touch there. And like, instead of just taking the taboo away from a taking the charge away from it and just being like, Oh, yes, you're exploring.

Yes, that does feel good there, because these are our our bodies. And I love what you say on our turn, on our terms and with our our choices. So let's talk a little for the women who need to hear some of the medical reasons.

Let's talk about why masturbation is healthy, why orgasms, what are what are the benefits, the physical and emotional mental benefits. So, you know, you have to understand at this time during that menopause transition, there are physiological and biochemical changes going on in a woman's body and the change in hormones and the drop in hormones, and particularly that hormone estrogen means that there are functional physical changes that are going on to our vulvas and of vaginas so that, you know, they become less plump, there's less lubrication and more dry.

You know, you maybe some of you may have heard the terms of vaginal atrophy or or vulvovaginal atrophy. Also, there's a decline in testosterone. And and, you know, whilst many women may have thought of testosterone as a as a male hormone actually is very important for us, the drive and sex drive and libido, the other hormone that declines is progesterone, which is really important for things like our mental health and also for sleep.

So, you know, around this time many women may be sleep deprived, lacking energy. And also there are changes physically going on that even if they do want to have sex, they're feeling uncomfortable.

You know, sometimes I hear terms like duty sex or it feels like barbed wire or shards of glass. And orgasms are important because not all women at this point in their lives or intimacy is important because not all women at this point in their lives.

Using toys and rebuilding body awareness

I mean, 23 year relationship, many women may be embarking on new relationships, new partnerships, and and sex

is intimacy. You know, it's a bonding. It's communication.

There's a release of hormones. The oxytocin, which you talk about like that love hug hormone. Also, we know that when you and an orgasm is good from the point of view of your mental health, it helps you sleep better.

It's calming, but also from a physical health point because, you know, you may have heard people say this before, use it or lose it. So if you don't use your vaginas, if you don't have penetrative sex, then, you know, often the vagina can contract, it can shrink, that can be dryness.

So the more activity we have and the more orgasms we have in a way can help to improve that lubrication, the sort of mucosal environment. And also the contractions help with our pelvic floor muscles as well.

So, you know, there are so many different aspects. And, you know, looking at it medically from a point of view rather than just from, you know, sort of a pleasure joyful sex experience.

And ultimately it does lift you lift your wellbeing. Yeah. I mean, truly right. The mind body sex really covers the mind and the body connection. And one of my favorite things to write on my prescription pad because I, I don't prescribe pharmaceuticals, but I like to write on a prescription pad to drive at home.

You know, orgasms. Love your self pleasure yourself, because like you said, I love that you said starting with you first, because before you go into a relationship and expect someone else to understand how to make you feel good, it's, I think, really important that you understand about yourself first, that you understand what makes you feel good and what you like and what you don't like, and that you feel comfortable doing that, that you can actually masturbate and look in the mirror at the same time and connect to yourself and not be disconnected.

So so let's talk about ways to masturbate and tools to use and what what so medicinal because you think of, well, I'm just going to go to a sex shop and get one of those, you know, big things and stick it in me and what's medicinal about that.

But there's something to the way these tools are created that's just so phenomenal. So so for me, you know, sometimes when you look at first of all, stepping into a sex shop can be quite daunting.

And now, yes, you can buy all of these things online, but they can look very daunting and no one really explains to you how to use them. And, you know, the reason I like the mystery vibe on so because particularly they're not the poker, the main device is that it's created like two fingers.

And I often start women off starting with no penetration at all, even with that device, you know, because it's got different settings and vibrations really, you know, I almost get them to start off by pressing against the nipples just to kind of familiarize themselves with some of those feelings that may have been switched off.

I often think that, you know, libido drops around this time of menopause also as part of a protective mechanism for women, because, you know, you've only got a certain amount of energy in the tank and you know you're going to prioritize it work.

Maybe children, you know, those kind of things. It's almost like self-preservation. So when it comes to sort of masturbation, sex, orgasms, you really haven't got much energy left, So you might have switched off.

And it's about reigniting those nerve endings again. So, you know, starts off by just getting pressing those vibrations up against, you know, your nipples, just making yourself aware of what's going on.

And then, you know, because it's like two fingers, I often just sort of say just sort of bend it and sit on it like a saddle. You know, So there's no penetration.

So underneath that perineum, you're just sort of placing it there and press it up against your clitoris. And so this is exactly what I do. My consultation, I say, you know, just pressed up against the clitoris because we notice clitoral

changes as well.

You can get clitoral atrophy so our clitoris shrinks. So what we want to do is get blood flow coming to it, we want to reignite it, and then you can just gently because it's so nice and malleable, the device, you can insert a small a little bit inside, you know, just around the vaginal opening.

And then you can go at your own pace. And often combining that with some nice music, making some time for yourself. If you want to put on candles, you know, an erotic app or something.

And it is about making that time. You know, I often say you do need to have to put some homework in is not just sort of suddenly going to be, you know, like a magic wand is going to wave that wave over you and everything's going to sort of, you know, reignite again because it's almost like this reawakening process going on.

Libido changes and other contributing factors

So that's why I particularly like the devices, because they're not intimidating. You know, you can use or insert as much or as little as you want and you can start slow and, you know, just gently build up over time.

And and so I almost say to women who are in relationships, tell your partner, you know, penetrative sex is off the table for the next sort of months or six weeks or so whilst you rediscover yourself.

And then when you that confidence back in your body and be aware also that changes have gone on. So you may need to use a good lube or a moisturizer, you may need to understand it takes a little bit longer to get fired up, it may take a little bit longer to reach orgasm, but enjoy the journey, you know, and get that confidence in yourself before taking it into that couple place situation.

And the other thing is because especially with a mystery vibe, because they've got an app, you know, it's always in a couple place setting, you can both play, you know, and use it as the third party in your, in your and your Google play.

That can be a lot of fun. So I have a couple of questions just from things that you said. So you mentioned loss of libido. Obviously the hormones as part of preservation.

Are there other things that women should be looking for from a medical perspective or an emotional perspective, things that can contribute to a declining libido as they're going through the perimenopause menopausal transition?

Well, you know, this is a really busy time for many women. You know, many women are sort of juggling a lot of balls at this point in a career, children, a lot of things.

So, you know, environmental factors, the layers of life themselves, you know, one in three of us will experience a loss of libido at any point in our lifetime.

And that's not not to do with your perimenopause and your menopause because of financial strains, because a relationship is due. And if there are things within your relationship, maybe there are some unsaid things that are going on there that you know, you haven't communicated with each other, then, you know, your libido is not going to bounce back until you kind of resolve some of these things.

So understand that libido is multifactorial. It's not just hormonal. There's lifestyle factors involved as environmental factors that involved. There's relationship and lack of communication issues going on.

Maybe you've just had a baby and you're tired because of that reason. You know, maybe you've got young children, you might be a single mum, you know, depression, those kind of things can also impact libido as well.

Those are things to be aware of. So, you know, sometimes I think that perimenopause sometimes I think perimenopause is a great time to have this medical check in, you know, just to kind of hone in on yourself and

break it down.

You may need some bloodwork, you know, blood tests done. You know, maybe you've got an underactive thyroid, which is making you feel tired. Maybe you've got an overactive one, which is making you feel anxious.

There could be a number of things going on and a lot of women experience things like iron deficiency anemia from heavy periods or because they're eating so much of a plant based diet, vitamin B12 deficiency, vitamin D deficiency.

So, you know, that could be all of these sort of micro level of things going on that you need to address to optimize yourself rather than feeling that life is hard work and you're climbing up the hill all the time.

Mm hmm. So for someone and I love interviewing you because I'm like, Oh, she says everything that I like, it's like listening to myself talk and have fun.

And so I just want to re-emphasize, you said a lot of good points. But yes, I find that also that we women, we, we get intimate on the social and emotional level first.

And so looking at what's unsaid in your relationship can often be, you know, men are in the other way. They connect, you know, they just want to go for it.

But we need that emotional safety. And so having those conversations or getting some help or whatever you need to do. So what do you think about women who just say, in general, I've always had a low libido, I've never really been interested?

What do you think about the range of libidos? Do you think that exists, or is it always a deficiency? No, I mean, I think I think there is a range. You know, we're all individual, you know, we all have different needs.

And, you know, also your partner may have different needs as well. And I think, you know, the problems can arise when there's that disparity in libido.

But often, you know, some women love the fact that, you know, at this point that his is declining and now matching up with hers.

Trauma, consent, and emotional safety

And, you know, she was never that interested in sex. You know, she maybe she gets her, you know, sort of dopamine high from running or she likes to, you know, hang out with her friends more or those kind of things or go to art galleries.

So I don't think anybody should be judged on their level of libido. It's when it feels like it's bothering you. And sometimes also I see women because it's impacting their relationships and that's when you know, the issues arise. So.

So like I said, I think everybody's just different. Everybody wants different things as a relationship. It's and, and I think we need to respect that and we need to respect those choices.

But I think what I would hope to that women would understand from this as well is that there is hope out there. If you are worried that this is not quite you, this is not how you want to live the next 30, 40, 50 years of your life, that there are potential choices and options and treatment options out there for you.

Yes. Agreed. And what about and we're not going to be able to do it justice. But just I feel like we can have this talk without just paying attention and acknowledging, like women who have been sexually abused and are dealing with that in their history.

What would you say? Any words of advice or how to handle that? I think, you know, this is often a time when trauma sort of bubbles to the surface. You know, I think many women who who may have experienced some level of abuse or trauma in the past, you know, have often been able to put a lid on it.

And then when the hormones start to change and you start to feel a bit more vulnerable, a bit more emotional, these things can bubble to the surface. And I would say, you know, go and seek some help because there's many more women out there than you probably think that are experiencing similar things and, you know, understanding, you know, it's not your fault.

You know, you're not responsible. Just, you know, maybe talking it through with somebody with a professional may help you move forward or at least, you know, sort of get an understanding and a grasp of it and for you to be in control.

Yes. Yes.

Orgasm, intimacy, and communication

So so if that's you know, that, you know, there's help and you know what we're saying diving into playing with your toys may not be the first step for you.

I just wanted to make sure we acknowledge that. So now we're going to go to orgasms. What a lead in. So but I do want to talk about orgasms, just like we tend to think sex is about reaching the orgasm.

And then there are some women who have never had an orgasm and there are many powerful benefits of orgasms, like it's one of my favorite sleep time prescriptions is have an orgasm, don't take the Ambien.

Have an orgasm that can help you sleep just as well. And no side effects except for feeling good. So what are your thoughts on orgasm in general and what I just mentioned?

Well, so so I think for women there isn't just one type of orgasm, you know, And I think that's also important, you know, for for men, you know, they sort of hit climax and and then, you know, they seem to have, you know, more and more one type of orgasm that is that build up peak climax.

And that's it. I think for some women there can be much more of a plateau. And the journey can be just as exciting. And it doesn't mean to say you have to have this massive peak.

Obviously there is the peak and the climax and then the decline and then for some women they can have multiple types. But I think, you know, again, I think, you know, understanding that our bodies are slightly different, it can take longer to reach that peak.

But that doesn't mean to say we have to reach our peak to, you know, we should always be aiming for it. In a way we just enjoy the journey. You know, don't overthink it, don't overplay.

And otherwise it brings a level of anxiety into into the moment as well. And, you know, I think that even men feel pressure these days to think that if the woman hasn't achieved an orgasm, there's something wrong with them.

So if you are in a heterosexual relationship, there can often be that sort of scenario where she starts to feel anxious that, oh my goodness, is it going to happen?

Is it going to happen? He sort of picks up on that anxiety and he's then thinking, am I not good enough? And then suddenly, you know, one party can end up faking it, Just let's just get it over and done with.

So I think, you know, just communicate to your partner. I really enjoyed that, you know. Yes. You may not have had got an orgasm or had an orgasm, but that doesn't mean to say you didn't enjoy the experience, because I think it's about intimacy more than orgasm is what I'm going to say, an intimacy.

You know, with that, you can still sleep well as long as you're not frustrated. And you did want to reach that orgasm kind of thing. But I think going back to that bonding and that sort of intimacy and that sort of release of oxytocin, and I think that that can be just as good from a sleep benefit and a world wellbeing benefit.

I love that intimacy over orgasm. I think that's like a banner or new kitchen mat. Yeah, let's do that. Yeah. That's a great idea, but it's really true.

I mean, I know just personally, I mean, I love a good orgasm, but there are times where, like, just like you said, I'm just enjoying it and I don't need to have an orgasm and.

And you need to tell your partner that so they don't have to feel like they have to do that for you. And then it becomes right. So what you said, you know, it's all life is always about communicating.

Do you not have to feel you have to, but do you feel that there is that pressure from men these days? Because sometimes, you know, I have to explain to my my boyfriend, I have to say to him, you know, you were just this did you have an orgasm?

I'd say, well, no, but I really enjoyed, you know, our our time together. You know, it's almost like you have to calm them down a little. It's okay. It's okay that I did.

You know It's okay. Yeah, I. I'd say, like, in the moment, you know, don't worry. I don't need to have an orgasm. I'm like, do. Yeah. So it really is about communicating like that.

So I'm curious like, if you could just kind of take us through, like, briefly, I don't know, you know, but like, what is it like going to see you for a consult?

Because sounds like you do lots of fun things and ask lots of fun questions, which. I think I think, you know, I would like to say that I also have the questions that maybe you'd like your doctor to ask, but, you know, but they don't ask and maybe you're too afraid to kind of bring to the surface yourself.

And and so when when when someone comes in, you know, often they're different. You know, people have different priorities. And it's important to recognize what her priority is, You know, what is it that she wants to get out of the first consult?

Because not everything will be sorted in one consultation. It is you know, it's going to take a little bit of time to get there. So, yeah, I mean, I will always ask things like, well, things like, well, how is your libido? Does it bother you?

And many a time in the first consult, women will say, No, it really doesn't bother me because honestly, they don't have the energy. They're more worried about not sleeping, feeling anxious, maybe their hot flushes, their brain fog.

And I'm like, okay, okay. So we sort of address things in sort of, you know, different stages. And then the second time she comes because she's got this energy and she's feeling back to her usual self or more like her usual.

Clinical consults and ethical porn

So then again, ask the questions. Yeah, you know, I really had I, I wouldn't mind having some of that back or women come in and say I don't want to feel like brother and sister in my relationship or flatmate.

So, you know, avoiding each other, going to bed. So, you know, it is very much a personalized and a tailored consultation to talk to you when you come in.

But it's bringing all of those years of experience and also me unabashedly, you know. So ask you this question in a safe space, you know, we will talk about sex parties and we will talk about, you know, sex toys and we will talk about, you know, of different types of relationship.

And I think more and more of us at this point in our lives are thinking slightly differently about our sex lives than we ever were before. And you're not pushing the boundaries a bit.

You know, I think women are pushing the boundaries a bit more for couples. And I agree. I see that too, in practice where and it's kind of like the way physiology is, right.

The body is going to first focus on survival before it's going to focus on procreate, you know, procreation and having babies and so forth. And so, yes, as you get your energy back in your sleeping because who wants to have sex if you can't even sleep and you're exhausted?

And so that's a great point. And so the last thing I want to just ask you, because you mentioned it earlier and probably some women heard it, but you said ethical porn.

And I think I'd love for you to talk because I love that. And I think we tend to just blanket statement porn is bad. Porn is an addiction. Get it off your computers and and there is this whole movement of ethical porn and I'd love for you to just introduce it to the listeners who haven't heard of it before.

And to be honest, you know, maybe about six or seven years ago, I would have been in a similar sort of, you know, sort of place, as many of the listeners as well, thinking, hang on, what is she talking about, this ethical porn?

And I think, you know, when we often think about when we think about it as degrading and derogatory to women, but ethical porn is consensual sort of, you know, women I mean, often they're female directors making porn for women.

And it was and it is, you know, women in that sort of stronger place, women in that sort of more controlling place, an enjoyable place. So so, you know, there and there are lots of different sort of types of it out there.

So for me, it's about women feeling respected, safe and and choosing, you know, rather than being maybe, you know, the old school type of porn that, you know, has that more demeaning, demeaning side to it.

So so I think, you know, when I, I do particularly signpost women to one site that I'm familiar with, which is the Erica Lost Lost cinema is one that I tend to use and I send women links to it, you know, You know, I would often have tried before everything before I have passed it on to my, my, my patients.

And I think it can add another dimension into that sort of relationship. And again, and the same thing with having a sex toy, you know, bringing another dimension into the relationship.

And that's why, you know, I will sort of safely advise mystery vibe. I was safely advised, you know, lost cinema to my patients because I've gone down and explored it and and I can share it with them.

I love. But yeah, I believe in pretty much whatever I prescribe to patients. I like to experience myself unless it's just something that not possible.

So like. Actually. When I was like, Oh, Mr. Revive is coming on board and they want to send me some say, I was like, Yes, this is going to be fun. And the best kind.

Slightly. More fun than, you know, eating something healthy or right. So, well, this has been fantastic. So where can the listeners find you and Mystery vibe and learn more.

And so I'm on Instagram, as you mentioned, I'm Dr. Shahzadi Harper. So as a doctor, she's already Harper and my website is www.theharperclinic.com. I also have a book of the perimenopause solution for women entering into that stage.

Also, mystery vibe is on Instagram at Mystery Vibe as well. So yeah, so do connect with us. And if you'd like to know anything or ask questions a DM away, you know, I like to sort of interact with my followers.

MM Wonderful. Well, thank you so much. This first time I'm interacting with you and I'm like, I'm like a raving fan now. So this was phenomenal. I think what you shared is really helpful for the audience and so go follow her and just kind of, you know, digest everything we talked about.

Where to find Dr. Harper and closing remarks

And I love what you said because it's very true from the physician standpoint, like not everything is going to be handled in a consult. It's it's the physician's job to kind of figure out what's most important and to create a plan.

And so I think for those of you listening, you can take that same approach to everything we discussed. We don't expect you to turn off this interview and go watch ethical porn and go change your relationship and go play with toys and all of these things.

But like just kind of sit with like, ooh, that really that really felt like something I want to follow or that interested me and kind of just go along your own path discovering because like Dr.

Harper said, you know, it's also, it's not about the destination we see. We hear that a lot. And it's really, really true in this situation. It's about the journey.

So be present, enjoy the journey, get some oxytocin flowing. It is only going to do the body good. So thank you so much, Dr. Harper, for for being here and sharing and just for the work that you're doing in the world.

It's phenomenal. And thanks everyone for listening and Will, we'll see you in the next interview. Thank you.