

Sex and intimate relationships after stroke

Stroke Helpline: 0303 3033 100
or email: helpline@stroke.org.uk

A stroke can have an impact on your sex life and intimate relationships. This guide looks at why this can happen, and offers practical advice and sources of help.

What can cause problems with sex after stroke?

It's very common to feel that a stroke has changed your relationship and sex life with a partner. If you're single, it could change how you feel about dating. Sex and relationship problems can happen to anyone of any sexual orientation or gender.

There are several reasons why you may have difficulties with sex after a stroke, including emotional changes, relationship problems and physical disabilities. But remember that help is available. Whether your difficulties are physical or emotional, you may find it helpful to speak to someone about it. Many of us aren't used to talking about our intimate relationships, but it can take away some of the worries you may have, and can let you get any help and support you need.

Health professionals, such as nurses or therapists supporting you after a stroke, should ask if you have any questions or worries about sex after you leave hospital and again at reviews. They can also help if your partner has any questions and can refer you to a specialist if needed. If your stroke was some time ago, contact your GP for information and advice.

Emotional changes

Many people feel low or anxious after a stroke, and this can make you feel as if you have lost interest in sex. If you're having difficulties with sex and relationships, this may lead to emotional problems.

Stroke can change your life in many ways. Perhaps you feel that you've lost your independence or that your relationships with the people you're close to are not the same as before. If your partner is caring for you, this can affect the way you see each other. You might also feel differently about yourself and your body after a stroke.

Relationship problems

Your stroke is likely to be just as life-changing for your partner as it is for you, which can put your relationship under a lot of strain. Your roles may change, which can take some time to get used to. If your partner is helping to care for you, it could affect the balance of your relationship. Other things can affect intimacy, like communication difficulties and low mood or anxiety. Having a stroke can affect your confidence and self-image.

You may both find it difficult to talk about how you feel, because you think you should 'stay strong' for your partner. But if you don't discuss your feelings, tension and resentment can build up between you both. It may be that one of you would like to have sex, while the other has lost interest in it. This could become a source of tension if it is not resolved. Openly discussing your feelings, listening to each other, and recognising how you both feel is the first step in sustaining a positive, healthy relationship.

If you are single, a stroke can sometimes pose challenges if you are looking for a new relationship. For example, it can be tough if you have problems with mobility or communication difficulties. A stroke can affect your confidence and self-esteem, which can also make it harder to talk to people. However, many people establish happy, healthy relationships after a stroke. The charity Different Strokes has video resources on its website with tips for dating after stroke.

Physical problems

- **Muscle weakness or spasticity** (muscle stiffness) may restrict how you move and how you can position yourself during sex. Spasticity can cause pain which could affect your enjoyment of sex.
- **Changes to sensation** like numbness can make you less sensitive to touch, or you might experience painful sensations like pins and needles.
- **Tiredness and fatigue** are very common problems after stroke. If your stroke has affected your mobility, simple daily tasks can be more tiring than they used to be. Fatigue means tiredness that does not get better with rest, and is a common condition for stroke survivors. Tiredness and fatigue can make it harder for you to do many of the activities you used to enjoy, including sex.
- **Continence problems** may be a source of worry or embarrassment, and you may avoid sex because of it. Catheters can cause practical difficulties when having sex as well. You should have your continence assessed before you are discharged from the stroke unit, and reassessed if there are still problems after two weeks.
- **Hormone imbalances** can sometimes be due to a stroke, leading to a wide range of problems, including difficulty getting an erection in men or low sexual desire in women. This can happen when a stroke affects the parts of your brain that are important for controlling hormones.
- **Other medical conditions** (such as diabetes, epilepsy or heart disease) and the medication you take for them can make it difficult for men to get an erection or reach orgasm, and can also lower sexual desire and reduce vaginal lubrication in women.

Can sex cause a stroke?

Some people avoid sex because of a fear that it will cause another stroke. While it is true that your blood pressure can rise when you orgasm, you're no more likely to have a stroke during sex than at any other time.

If you had a haemorrhagic stroke (bleeding on the brain) due to a burst aneurysm, and you feel worried that sex could trigger another bleed, contact your GP or stroke specialist nurse for advice. If an aneurysm and any other risk factors like high blood pressure have been treated, this risk should be very small.

Whatever the cause of your stroke, you can visit your GP to ask for help with reducing your risk of another stroke.

Behaviour changes

A stroke can damage parts of the brain that are linked to the emotions, leading to problems with controlling emotions. Psychological care, such as emotional support and wellbeing, should be provided by the stroke team.

Some people have difficulty controlling their mood and seem angry or irritable, which can put a strain on relationships. Others find that they become more sexual or lose inhibitions. They might behave and talk differently, such as talking to someone about sex when it's not appropriate.

If people close to you say they are worried about your behaviour, try to be open to what they say and remember that they care about you. It could be difficult to talk about for both of you, but it can help to discuss ways of dealing with it. For instance, if you agree that you sometimes act inappropriately, you could make an agreement with your loved ones about what to do when it happens. For example, you could agree on a signal to make you aware, and let you take a minute to think.

Think about your own safety. For example, if you choose to access sexual services or pornography, this might put you at risk or have an impact on your relationships and financial situation.

Contact your GP, who should be able to offer advice and refer you to a specialist for help if needed. Visit stroke.org.uk to read more information on behaviour changes after stroke.

What can help sexual problems?

This guide can only give general information. You should always get individual advice about your own health and any treatment you may need from a medical professional such as a GP, pharmacist or nurse. You can also access emotional support through your GP or by contacting a psychology professional, such as a counsellor.

The first step in dealing with any problem is to talk about it. This isn't always easy, and you may find it difficult or embarrassing to talk about things like a lack of desire or not being able to get an erection. However, these kinds of problems can affect anyone at any time, not only people who have had a stroke.

Talking and being open about your feelings can help your relationships, and might also help in dealing with sexual problems. Many people want advice about sex and relationships after a stroke and there is help and information available.

It's also important to look after yourself. Try to have an active, healthy lifestyle, including eating a healthy diet and being as active as possible for you. This can help improve your overall health, as well as your sexual and emotional wellbeing.

Help with emotional changes

Get help with low mood or depression

If you're feeling low or depressed, your GP can refer you to services such as talking therapies and cognitive behavioural therapy (CBT). Talking therapy gives you time and space to talk about difficult feelings with a trained therapist.

The GP can talk to you about whether anti-depressant medication may help. Some medications can cause loss of interest in sex as a side effect, but you may be able to try different types to find what works best for you. Tell your GP or pharmacist if you experience any problems. Don't use over-the-counter or herbal remedies without speaking to your pharmacist, as they can cause adverse reactions with other medication.

Reduce anxiety about sex

Few people feel like having sex when they are tense and anxious, so it's worth giving yourself time to get in the mood beforehand. Choose a time when you and your partner are both relaxed and can be sure you won't be interrupted. Showing affection to each other is really important. Every couple has their own way of doing it, but you could try hugs, running a bath for your partner or simply giving them a compliment.

Above all, remember that sex is not a performance. You don't have to 'succeed' or achieve a 'goal', and it doesn't always happen perfectly every time. Remember there are various ways to express your feelings and be close to another person. You could start by getting to know your partner physically again without attempting to reach orgasm. Many people get pleasure from touching, kissing, cuddling and massage.

You might feel as if a lot has changed about you and your body, and masturbation can help you learn about how your body now responds to sexual feelings.

You can do it by yourself or with a partner and it can be just as fulfilling as other kinds of sexual activity.

Help with relationship problems

Talk about your feelings

Talk to your partner about the things you are finding difficult. Try to work out what you could both do to make things easier. Tell them how you are feeling and listen to what they want to say. Try reading this guide and talking about it together.

You may feel awkward about bringing up the subject of sex, but having an honest conversation about what you are finding difficult is the first step to making changes. Set aside a time to talk when you won't be interrupted, and choose a place where you both feel comfortable. Sometimes it's easier to talk about sex away from the bedroom, so neither of you feels under pressure. Take it in turns to talk and listen carefully to each other.

Tips for having conversations

You and your partner might disagree about things and with the stress of stroke, you may find you are arguing more than you used to. Whatever you and your partner are feeling is okay. Stroke can turn lives upside down and it's bound to take time to adjust. The following tips can help:

- Pick your time. Try to make time for conversations when you are both fairly relaxed.
- Try to say 'I' rather than 'you'. For example, saying 'I would like it if you tried to talk to me more' will probably be received much better than 'You never talk to me'.
- Try to acknowledge what the other person has said by repeating it back to them before sharing your own point of view.
- Take a break if you need to.

Enjoy time together

It doesn't have to be all talking! Try spending time as a couple doing an activity you both enjoy. If you can't do the things you used to do, this could be an opportunity to try something new together. Be creative. It can also be nice to remind each other what brought you together and what you really love about your partner.

Your relationship might feel less like an equal partnership sometimes. For example, if you always used to take the bins out or organise finances, but can't anymore because of your stroke, this may feel difficult for both of you. Talk to your partner and come up with some ways you can both contribute to the relationship.

Professional help with relationships

Talking about your feelings is difficult, even with someone close to you, so it can often help to get professional support. Relationship counselling can give you a safe space to find a way through the difficulties you're facing.

Single people can also go to relationship counsellors. If you're in a couple, you can choose to go alone or with your partner. Usually a counsellor will ask you questions so that you, and your partner if you have one, can talk about what's going on and how you feel.

Sex therapy can help single people and couples focus on the physical aspects of relationships. A sex therapist can help you work out how to handle problems and find a solution that works for both of you. All the work you do with a therapist will be based on talking, but they will be able to offer you advice and suggest things for you to try at home. See '**Other sources of help and information**' later in this guide for details of organisations that provide relationship counselling and sex therapy.

If you have communication problems that make it hard for you to speak or understand speech, your speech and language therapist can help you and your partner find a way to communicate with each other. It can be difficult, but try to be patient – things will get better with time and you will find a way to say what you want to each other.

Help with physical problems

Muscle weakness or spasticity

Some physical problems might make sex a bit less spontaneous but there are often practical solutions to whatever problem you are having. If you have weakness down one side or muscle stiffness, finding the right position for sex may be a case of trial and error. That doesn't have to be a bad thing. Think of it as an opportunity to explore what you can do in bed, including different ways of doing oral sex and masturbation.

You may find that lying on your side is more comfortable. If one side of your body is weaker than the other, lying on your weak side will leave your stronger arm free. Using lubricants during sex can reduce pain and improve your enjoyment. Talk to your physiotherapist or occupational therapist, who will be able to give you practical advice.

There are some links to resources with suggestions for sexual positions for people with muscle weakness and disabilities later in this guide.

If you are using pain medication for spasticity, you could think about intimacy at the times of day when the medication is most effective for you. For more information about treating pain, visit stroke.org.uk to read our guide 'Pain after stroke'.

Tiredness and fatigue

If you often feel very tired, try having sex in the morning or at the times of day when you have more energy. For more information about fatigue, visit stroke.org.uk to read our guide 'Fatigue after stroke'.

Side effects of medication

If you suspect a medication is affecting your sex life, talk to your GP or pharmacist about it. They may be able to review your prescription, but never stop taking a drug without talking to your doctor first.

Erection problems

If you're having problems getting or maintaining an erection, it's important to tell your GP. Erection problems can be a sign of health problems like heart disease, high blood pressure and diabetes. Your GP can treat any underlying health conditions that may be causing your problems. Although it can feel embarrassing to talk about, it could be vital for your health.

If an erection problem is due to the effects of a stroke, some practical solutions and treatments may be available. Again, speak to your GP first.

Lifestyle changes. Some practical steps like losing weight if you need to, stopping smoking, and cutting back on alcohol can help with erection problems. Becoming more physically active if you can, reducing stress and treating symptoms of anxiety and depression can also benefit you.

Drugs to improve an erection. Drugs called phosphodiesterase-5 (PDE-5) inhibitors work by temporarily increasing the blood flow to your penis. The most well-known of these is Viagra, and other brand names include Cialis, Levitra and Spedra. However, these should be avoided for the first three months after stroke and until your blood pressure is under control, and you should seek guidance from your GP before taking them. You may not be able to take them if you have heart disease, low blood pressure, or are taking some types of medication for high blood pressure. You may not be able to use these drugs if you are at risk of priapism, a painful, long-lasting erection which can happen to men with sickle cell disease. Some side effects of these drugs can include headaches, flushed skin and nausea.

Vacuum pumps. These are clear plastic tubes that you place over your penis. The tube is connected to a pump, which removes the air. This creates a vacuum around your penis, which causes blood to flow into it, making it erect. A vacuum pump should not be used if you are also taking anticoagulant medication (for example, warfarin).

Alprostadil is a drug that increases blood flow. It can be applied as a cream or injected into the penis to produce an erection. Speak to your doctor first as not everyone who has had a stroke may be able to use this medicine.

Vaginal dryness

When a woman becomes aroused, her vagina should become naturally moist and lubricated. If this doesn't happen, sex can be painful. The main treatments you can try are:

- Lubricants you can apply during sex. These are usually liquids or gels and are available without a prescription.
- Vaginal moisturisers are gels or creams you can use regularly, to keep the vagina moist.
- Vaginal oestrogen can help women with vaginal dryness linked to the menopause.
- Hormone replacement therapy (HRT) can help women with vaginal dryness linked to the menopause. Some women will be advised not to take HRT tablets due to their other risk factors, but can use skin patches or gel.

If you have had an ischaemic stroke (caused by a clot), have high blood pressure or are aged over 60, your GP can advise you about the best option.

Ask your pharmacist for advice about lubricants and moisturisers. Contact your GP to talk about vaginal oestrogen and HRT.

Continence problems and catheters

If you have continence problems, try going to the toilet just before sex. Protect the bedding with a waterproof sheet, and have towels and tissues ready to mop up any leaks.

If you have a catheter, your doctor or nurse can show you how to remove and replace it. Your doctor or nurse can give you a valve that allows you to remove the drainage bag during sex. If you're a woman, you may find it helpful to tape your catheter forwards and to one side using surgical tape. Men can bend the catheter back along their penis and hold it in place with either surgical tape or a condom.

Sexual health and contraception

Talk to your GP or visit a local sexual health clinic to get advice about sexual health and contraception.

Preventing pregnancy

Women who have had an ischaemic stroke or transient ischaemic attack (TIA) probably won't be able to use the combined oral contraceptive pill (combi pill). The combi pill contains oestrogen which raises the risk of clots. Contraceptive implants, patches and intrauterine systems (IUS) also contain hormones, but some don't include oestrogen. There are also non-hormonal options such as condoms, the contraceptive cap and intrauterine devices (IUD). Visit your GP or a local sexual health clinic for help with choosing the best one for you.

Sexual health

To avoid sexually transmitted infections, you need to use a male or female condom, and for oral sex you should use a latex or polyurethane square. If you use condoms, don't use oil-based lubricants or creams, as they can make the condom more likely to leak.

Where to get help and information

From the Stroke Association

Helpline

Our Helpline offers information and support for anyone affected by stroke, including family, friends and carers.

Call us on **0303 3033 100**, from a textphone **18001 0303 3033 100**
Email helpline@stroke.org.uk

Read our information

Log onto stroke.org.uk, where you can find easy-to-understand information, videos and an online community to support you. You can also call the Helpline to ask for printed copies of our guides.

Other sources of help and information

College of Sexual and Relationship Therapists (COSRT)

Website: cosrt.org.uk

Tel: **020 8106 9635**

Professional body for sexual and relationship therapists. Find qualified private therapists and information about therapy and common problems on their website.

Different Strokes

Website: differentstrokes.co.uk

Charity which offers video resources with tips on dating and relationships after stroke.

Disability Horizons online magazine

Website: disabilityhorizons.com

Information and practical tips on all aspects of living with a disability including a section on relationships and sex.

Sexwise

Website: sexwise.org.uk

The Sexwise advice and information website is run by the sexual health charity, the Family Planning Association (FPA). It gives information about sexual wellbeing, sexual problems as well as contraception and pregnancy.

LGBT Foundation

Website: lgbt.foundation

Tel: **0345 330 3030**

LGBT Foundation is a national charity delivering a wide range of services to lesbian, gay, bisexual and transgender (LGBT) people. It provides counselling for individuals and couples and a helpline offering information and support.

NHS One You Sexual Health

Website: nhs.uk/oneyou/sexual-health

National Sexual Health Helpline:

0300 123 7123

Website and helpline offering support with sexual health and wellbeing.

Outsiders

Website: outsiders.org.uk

Helpline: **07900 957 393**

A free club for people with disabilities. The club can be used as a dating site or simply for befriending and support. The Outsiders Trust also offer support on relationships, sexuality and dating.

Relate (England and Wales)

Website: relate.org.uk

Offers relationship and sex counselling (face-to-face, online and via telephone). There is also lots of useful information on their website.

Relate Northern Ireland

Website: relateni.org

Advice, counselling and resources for people in Northern Ireland.

Relationships Scotland

Website: relationships-scotland.org.uk

Tel: **0345 119 2020**

Provides relationship counselling and support services across Scotland.

Spokz

Website: spokz.co.uk

Tel: **01543 399670**

Makes disability equipment including equipment to help with sex if you have weakness or paralysis.

Books

The ultimate guide to sex and disability: for all of us who live with disabilities, chronic pain, and illness

Miriam Kaufman

Cleis Press, 2020

Book about sex and disability including advice on sexual positions. Available in print and as an e-book.

About our information

We want to provide the best information for people affected by stroke. That's why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.

How did we do?

To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at feedback@stroke.org.uk

Accessible formats

Visit our website if you need this information in audio, large print or braille.

Always get individual advice

This guide contains general information about stroke. But if you have a problem, you should get individual advice from a professional such as a GP or pharmacist. Our Helpline can also help you find support. We work very hard to give you the latest facts, but some things change. We don't control the information provided by other organisations or websites.

© Stroke Association 2023
Version 4. Published July 2023.
To be reviewed: September 2025
Item code: **A01F31**

Every five minutes, stroke destroys lives. We need your support to help rebuild them. Donate or find out more at stroke.org.uk

The Stroke Association is registered as a charity in England and Wales (No 211015) and in Scotland (SC037789). Also registered in the Isle of Man (No. 945) and Jersey (No. 221), and operating as a charity in Northern Ireland.