

Changes in sexuality and intimacy

Our need for physical and emotional closeness and how we experience sexuality changes over time. Some of these changes come with maturity, while others reflect life circumstances, such as a diagnosis of Alzheimer's or another dementia.

The symptoms of dementia may affect sexual feelings, which can result in changes in behavior or the desire for and the expression of affection. As dementia progresses, it's important to take the needs and expectations for intimacy into consideration, as these changes will affect both the individual living with dementia and their intimate partner. It's common for both people to feel guilt or shame about changing sexual feelings or inhibition, and it's important to seek appropriate support to cope with any difficult feelings.

The type and level of intimacy can vary between relationships. In the early stage of the disease, intimate relationships may be affected by changes in the level of emotional connection and sexual desire between partners. While these changes are normal in light of both typical aging and how dementia progresses, coping with them can be difficult. Talk with your partner so you can identify a mutually enjoyable approach to intimacy.

Changes in sexual desire

Exploring sexuality and intimate touching are natural human needs. It's common for either partner to lose sexual desire as dementia may cause changes in personality, roles or energy levels. If a decrease in sexual desire becomes problematic for either partner, consult with your doctor to determine if there is a medical cause for the change.

Common reasons may include:

- Physical illness or diagnosis not related to Alzheimer's or another dementia.
- Hormonal imbalance.
- Side effect of medication.
- Depression.

If dementia causes an increase in sexual interest and desire, discuss ways to provide affection and affirmation that are comfortable for both of you. Consider ways to maintain sexual intimacy:

- Explore nonsexual touching, such as cuddling or massage, as a substitute for sex.
- Share intimate moments that do not require sexual touching, such as reminiscing, watching a movie or sharing a meal together.

- Try not to take changes in sexual desire personally. It's normal to feel lonely and rejected, and it may help to talk to your partner or someone you trust about these feelings.

Changes in sexual behavior

As the disease progresses, changes in sexual behavior may occur. This can include inappropriate and aggressive sexual advances, which may result from loss of inhibition or increased desire due to changes in the brain. In the middle or late stage of dementia, noticeable changes in sexual desire may be caused by the inability to recognize a sexual partner or agitation.

The following suggestions may help partners respond calmly and confidently when desire is expressed inappropriately:

- Do not overreact or express shock.
- Try to redirect the person to another activity.
- Avoid becoming angry or argumentative.
- Do not use shame or ridicule.
- Redirect to a private area if behavior is inappropriate for a public setting.
- Be sensitive and reassuring.

In the middle or late stage of the disease, changes in sexual expression may lead to behavior such as publicly undressing or sexually suggestive behavior.

- Possible reasons for inappropriate undressing include:
 - Time of day — the person may simply want to get ready for sleep.
 - Clothing that's too tight.
 - Hot weather or an overheated room.
 - The need to use the toilet.

Take care of yourself

Changes in sexuality and the expression of physical or emotional closeness are unique experiences for every individual whether involved in an intimate relationship or not.

Consider the following tips to help cope with such changes and support your emotional health:

- Do what feels best for you.
- Try not to feel guilty if you no longer wish to have sex with your partner. Find new ways to connect.
- Understand that you may have conflicting feelings about wanting to continue your sexual relationship in light of the changes that are occurring. It may help to discuss this with your partner, peers, faith leader or counseling professional.

- Know that there is no single approach that will work for every couple.
- Join an Alzheimer's Association® support group (alz.org/CRF), call our 24/7 Helpline (**800.272.3600**) or join ALZConnected® (alzconnected.org), our online community, to confidentially discuss changes in your relationship and learn new coping skills.

Visit alz.org/i-have-alz to learn more.

TS-0027 | Updated July 2024