Sex and relationships

Information for partners of people with motor neurone disease

This information sheet provides guidance if you have concerns about sex and intimacy when your partner has MND.

The content includes the following sections:

1: How might MND affect sex and intimacy?
2: How can sex and intimacy be maintained?
3: Are there other ways we can be close?
4: Where can I get support if I have experienced sexual violence or abuse?
5: How do I find out more?

When used, the term ‘partner’ refers to anyone with whom you have a sexual relationship.

This symbol is used to highlight our other publications. To find out how to access these, see Further information at the end of this sheet.

This symbol is used to highlight quotes from other people with or affected by MND.

This information has been evidenced, user tested and reviewed by experts.
1: How might MND affect sex and intimacy?

It can be reassuring to know that MND has no direct effect on fertility, libido, sexual arousal, the ability to have an erection or orgasm. If your partner experiences changes to their sexual function, it may be helpful to discuss this with their GP, as these changes won’t necessarily be related to MND.

Depending on how your partner’s symptoms progress, you may find that MND has an impact on their sexual expression and confidence.

For information about sex and relationships for your partner, see: Information sheet 13A – Sex and relationships for people with MND

Why has my partner’s sex drive changed since diagnosis?

An MND diagnosis can cause strong emotions, and your partner is likely to need time to adjust. Illness or disability of any kind can have an impact on how we feel about ourselves.

Anxiety, fear and depression can reduce arousal and interest in sex. With MND, your partner might experience fatigue and this can affect their sex drive. For more information, see later heading How can I manage the effect of fatigue on my sexual relationship? in section 2: How can sex and intimacy be maintained?

For some couples, the sexual side of a relationship becomes less important, while shared activities and time together become more valuable. For others, there might be an increase in sexual arousal. Love-making could be very important to you and, after diagnosis, can become even more so.

Having a low mood can affect confidence and reduce sexual desire. If your partner is feeling very low and these feelings do not pass, it could be a sign that they are depressed.

Symptoms of depression include:

- feeling persistently sad or anxious
- feeling worthless
- loss of interest and pleasure in things.

If your partner is experiencing these symptoms, you could suggest that they ask their GP for guidance.

For more information about managing the emotional challenges of MND, see our guides: Emotional and psychological support and Changes to thinking and behaviour with MND
How might MND affect our relationship?

Any problems or difficulties you experienced in your relationship before the MND diagnosis could continue. However, as you face the challenges of the disease together, you might find new understanding and resolve previous difficulties.

When one person becomes ill or disabled, the balance of the relationship can change. This can result in different expectations and sometimes leads to tension between partners. It is helpful to discuss any worries you have with your partner, as they might have similar concerns. Open and honest communication can help both of you adjust to these changes and can reduce any sense of conflict.

“It is easy for the person with MND to withdraw and for the carer to be preoccupied with caring. It is important to take time to remember to show each other that you still care. I can't stress how important this is.”

Why has my partner’s behaviour towards me changed?

Some people with MND experience changes to their thinking and behaviour due to changes in the brain. For many, the changes are subtle and have little effect on daily life. In a small number of people, the changes can be more apparent and additional support might be needed to manage daily routines.

People affected might experience difficulties with:

- thinking and learning
- language and communication
- behaviour and emotions.

If your partner’s behaviour is affected in this way, they might have difficulty recognising your feelings or be unable to read your facial expressions. This does not indicate a lack of caring, but MND may have made it harder for them to respond to emotions.

If your partner begins to behave inappropriately, to you or other people, this can be very distressing. Knowing it is part of the disease can help you manage situations. Distracting them with another interest or activity can help.

If you are concerned that your partner is experiencing changes to their thinking and behaviour, contact their health and social care team for advice. It might be useful to share information sheet 9B with them, as they might not be aware that MND can cause changes to thinking and behaviour.
2: How can sex and intimacy be maintained?

How can we still be intimate when my partner has limited movement?

If your partner’s movement is affected by MND, you might need to take a more active role sexually. This could include trying different sexual positions or sexual activities such as massage, oral sex or mutual masturbation.

Sexual aids, for both men and women, can be obtained from the internet, as well as specialist shops. Although you might initially feel embarrassed if you have not used sexual aids before, they can be helpful if your partner has limited movement, or experiences fatigue. Any changes can take time before you both feel at ease. It helps to keep an open mind, try to be patient with each other and don’t be afraid to laugh together.

Websites vary greatly in terms of what they offer, how information is presented, and how much items cost. To help you start your search, see Useful organisations in section 6: How do I find out more?

Even if your partner has limited movement, their sense of touch is not affected by MND. Both you and your partner can still enjoy the comfort and pleasure of touch. If their hands or arms are affected, you could suggest taking their hands and using them to stroke your body or face so that you can both share the warmth and intimacy of this touch.

If you enjoy the closeness and intimacy of kissing, hugging and cuddling, make sure your partner is aware of this. They might value this more than they used to. Telling them how you feel about them is important in maintaining intimacy.

Adjusting to my partner’s changing body

Having MND can make your partner more aware of their body. As changes take place, you may find that they focus on problems, difficulties and things that are no longer the same. This can affect their self-esteem, which can affect their sexual confidence.

They are likely to need time to adjust to these changes. It can be helpful for them to discuss these concerns with you, a close friend or someone from their health and social care team.

If their confidence is low, it can be easy for them to assume that you are less attracted to them. This can result in them waiting for you to initiate sex. However, you may worry about putting pressure on them to have sex. This can lead to a situation where you both misunderstand each other’s needs and feelings. This is where open communication becomes very important.
To help them feel more confident sexually, it might help if they choose an item of clothing to wear, you adopt a different sexual position, or adjust the lighting.

If they have any swallowing difficulties with MND, they might experience problems with controlling saliva. If they are embarrassed by this, wearing dark, patterned tops or adopting a sexual position on their side can help.

If saliva is a problem, you could suggest they discuss this with their doctor, as there might be medication that can help.

For more information about saliva control, see:
Information sheet 7A – Swallowing difficulties

**How can we manage the effect of fatigue on our intimate relationship?**

Fatigue is a common concern of people with MND. If you are supporting your partner and taking on more daily routines, you could also be experiencing tiredness. Both of you might need to be more flexible about the time you spend together. Some people find that they are less tired in the mornings; others are less tired in the evening. Listen to your bodies and pace yourselves.

Although it might not feel as spontaneous, planning ahead for when you are going to have sex can help you both. It can help to experiment with less demanding sexual positions, perhaps with you taking on the more active role, or by having sex lying side by side. You could also agree with your partner that love-making need not always be a long session.

There are a variety of ways of being intimate and showing each other how you feel. Your partner might find that oral sex, mutual masturbation or using sexual aids is less tiring than penetrative sex. You might both find that kissing, rubbing noses, cuddling or stroking is all you need to feel close.

SH&DA have produced a leaflet on sex and fatigue. See *Useful organisations* in section 6: How do I find out more?

**Can we have sex if my partner has a feeding tube?**

If your partner has a feeding tube, you might be worried that it could move or fall out during sex. If their tube is secured by a button inside the stomach, this is rarely dislodged (usually known as a PEG tube). If their feeding tube is held in place by an inflated balloon of water (usually known as a RIG tube), a little more care might be needed.

You might both feel more confident if the tube is taped to their skin during sex. Some people prefer to wear tighter clothing to hold the tube still, such as a tight t-shirt, vest or camisole.
Can we have sex if my partner has breathing problems?

If your partner has any breathing problems with MND, you might both worry about them getting breathless during sex. If they find that pressure on the chest or abdomen is uncomfortable, it might be necessary to consider a more upright or semi-upright sexual position so they don’t feel as restricted. They might find intercourse easier if you support your own body weight in a seated position.

If they use a ventilator, it is not harmful to have sex. They can wear their face mask during intercourse if needed. They might feel able to manage without it, but might want to keep it nearby in case they feel they need to use it following sex.

Will any of my partner’s medication affect our sexual relationship?

Some prescription medications can affect sexual function, sexual desire, or the ability to become aroused or achieve orgasm. Other drugs, such as those that reduce saliva, can cause vaginal dryness. If you have any questions or concerns about medication that either of you are taking, it is important to discuss these with your doctor.

Which sexual positions might be more comfortable?

This is very much a matter of individual preference, and you might need to experiment in order to find the most comfortable position. It might be necessary for you to take a more active role to help your partner feel comfortable. Whatever you try, a willingness to laugh together while you experiment can help to maintain intimacy.

If your partner’s breathing feels restricted lying down, being in an upright or semi-upright position can help them to breathe more freely. They might find a sofa or comfortable chair more supportive than a bed. Their occupational therapist can give advice, as there are slings and other equipment available to help achieve more comfortable positions.

How can my partner use condoms?

If your partner uses condoms and you are concerned about how they will be able to apply them if their hands are affected, it is helpful to talk about this in advance. You might feel able to put the condom on for them as part of your love-making. Your GP, practice nurse or family planning clinic can advise on other forms of contraception, if preferred.
What if sex has become routine?

In long-standing relationships, sex can sometimes follow a similar pattern, possibly in the same place, or at the same time of day. Now might be a good time to be more creative and revisit some of the things you used to do when your relationship was new. You might also want to try different ways of pleasing each other.

Many people find it helpful to rediscover their sensual areas by gently exploring the whole body and identifying areas that are pleasurable. Try altering the pressure and rhythm of touch, not just for areas commonly associated with sexual pleasure, but for the whole body. The purpose is not to lead up to sexual intercourse or orgasm, but to learn about each other’s preferences, likes and dislikes. This is not something that can be rushed. Health professionals might refer to this technique as ‘body mapping’ or ‘sensate focus’.

Body mapping can be done either on your own or with your partner. If you do this together, it provides an opportunity to learn what each other finds stimulating and pleasurable. You might both prefer to use your hands, or you might kiss, lick or nibble each other’s bodies to discover what each other enjoys. Be honest with each other and say how you feel, what you like and what you don’t like. This process can help to improve communication and understanding between you both.

What if I am also my partner’s carer?

If you are also your partner’s main care-giver, this might strengthen your relationship. However, it could also cause strain as roles shift and change.

Accepting external support for some of your partner’s care might be helpful. This can give you some rest and help you both hold on to what was unique about your close relationship before your partner had MND.

For detailed information for carers, see our guide: Caring and MND: support for you

Can professionals help?

You and your partner can ask health and social care professionals about any concerns regarding your sexual relationships and sexual expression. They might not raise the subject themselves if worried about causing offence or appearing intrusive, so do ask for help if needed.

They may advise or refer you to a specialist. For example, occupational therapists and physiotherapists can provide guidance on all aspects of daily living, including sex, if they know there is an issue. You can also raise concerns with one of the team at your MND care centre or your local neurological clinic.
If it feels awkward, it can help to start the conversation with: ‘Can I talk to you about something personal?’ Or, ‘do other people find that...?’ You could even show them this information sheet. If you feel the member of staff is uncomfortable, do not be put off. Ask who else you can be referred to discuss your concerns.

3: Are there other ways we can be close?

Many partners of people with MND find that their sexual relationship becomes less important as their priorities change. For example, you might begin to value other aspects of life differently and find that shared activities become more significant for you both.

Telling your partner how you feel about them is important in maintaining intimacy. If you value the closeness and intimacy of kissing, hugging and cuddling, make sure your partner is aware of this. They might also value this more than they used to.

It is helpful to talk about how you can create times within your day when you can have quality time together as a couple. Something as simple as going to bed at the same time can provide opportunities to be together, to talk and touch. If you sleep in separate beds, you might want to explore other ways you can be physically close during the day. A sofa or inflatable mattress might provide opportunities for shared intimacy.

What if we have different sex drives?

In any relationship, there can be times when one partner is keener to have sex than the other. This can be for a variety of reasons, including different sexual appetites, being busy or tired, and being pre-occupied with thoughts or worries. See earlier heading Why has my partner’s sex drive changed since diagnosis? in section 1: How might MND affect sex and intimacy?

If your partner’s need for sex is less than yours, enjoying closeness for its own sake can help them feel less pressured.

If your sexual needs have lessened, it is helpful to explain this to your partner so that they don’t feel that your lack of interest in sex is a lack of interest in them. Feelings of self-doubt, fear or uncertainty, can be avoided if your partner knows your feelings for them are unchanged and only your appetite for sex has lessened.

Choose your moment carefully, when you have uninterrupted time together, and be prepared to listen to your partner’s feelings and point of view. In order to prevent them feeling rejected, it is helpful to offer an alternative, such as: ‘We don’t need to have sex for me to feel... but I would love to...’

There may be times when yours and your partner’s sexual needs are met through masturbation or by using sexual aids. This might be something that you feel able to share with each other, or that you do alone.
If differences in sexual interest create tensions within your relationship, it can be helpful to talk to a counsellor who specialises in this area. See *Useful organisations* in section 6: *How do I find out more?*

**What if their speech is affected?**

If MND has affected your partner’s ability to speak, you might both feel that it limits intimacy. However, sex is often a time when people can express themselves without having to talk.

You might want to develop a sign language or a personal code that has special meaning for you both. They could also write or record their feelings for you in advance. Although this is less spontaneous, it can still be a helpful way for them to express how they feel about you.

Communication aids can help, so ask your partner’s GP for a referral to a speech and language therapist. They can assess their needs and advise about appropriate aids and therapy.

For more information about difficulties with speech, see: *Living with MND* – our guide to MND and how to manage its impact

**4: Where can I get support if I have experienced sexual violence or abuse?**

An MND diagnosis often provides an opportunity for people to ‘take stock’ of their lives. At times, this can uncover painful and distressing emotions. If you or your partner have been affected by sexual violence or abuse and would like support in dealing with this, one of the following organisations could be of help. For general support regarding sex and relationships, see also *Useful organisations* in section 6: *How do I find out more?*

Please note: contact details are correct at time of going to print, but can be subject to change between revisions. If you need help to find an organisation, contact our MND Connect helpline (see *Further information* at the end of this sheet for details).

**National Association for People Abused in Childhood (NAPAC)**
Provides support and information for people who have been abused in childhood, and those close to them. Support is available via email or telephone.
Address: PO Box 63632, London SW9 1BF
Telephone: 0808 801 0331
Email: support@napac.org.uk
Website: www.napac.org.uk
Rape Crisis
Provides support and information for people who have survived sexual abuse or rape, as well as partners, family and friends.
Address: BCM Box 4444, London, WC1N 3XX
Telephone: 0808 802 9999
Email: info@rapecrisis.org.uk
Website: www.rapecrisis.org.uk

Survivors UK
Provides support for men who have been raped or sexually abused.
Address: 11 Sovereign Close, London E1W 3HW
Telephone: 0203 598 3898
Email: info@survivorsuk.org
Website: www.survivorsuk.org

5: How do I find out more?

Useful organisations

We do not necessarily endorse any of the following organisations, but have included them to help you begin your search for further information.

The contact details are correct at the time of print, but can change between revisions. If you need help to find an organisation, contact our MND Connect helpline (see Further information at the end of this sheet for details).

College of Sexual and Relationship Therapists (COSRT)
Provides information on sexual problems and a list of local therapists.
Address: PO Box 13686, London SW20 9ZH
Telephone: 020 8543 2707
Email: info@cosrt.org.uk
Website: www.cosrt.org.uk

LGBT Foundation
Provides information, support and advice to lesbian, gay and bisexual people. They offer online support and a forum specifically for carers.
Address: 5 Richmond Street, Manchester M1 3HF
Telephone: 0345 330 3030
Email: info@lgbt.foundation
Website: http://lgbt.foundation/

Relate
Provides information, counselling or psychosexual therapy to anyone seeking help with their relationship.
Telephone: 0300 100 1234
Email: Via the website
Website: www.relate.org.uk
The Sexual Advice Association
Provides information and advice about a range of sexual issues.
Address: Suite 301, Emblem House, London Bridge Hospital, 27 Tooley Street, London SE1 2PR
Telephone: 020 7486 7262 (helpline)
Email: info@sexualadviceassociation.co.uk
Website: www.sexualadviceassociation.co.uk

SH&DA Sexual Health and Disability Alliance
Supports health and social care professionals supporting disabled people with sex and relationships. You might want to share these details with professionals working with you.
Address: BCM Box Lovely, London WC1N 3XX
Telephone: 07770 499 3527
Email: trust@outsiders.org.uk
Website: www.shada.org.uk

Spokz
Website offering a range of disability equipment, including sexual aids.
Address: 2 Jordan Croft, Fradley, Lichfield WS13 8PN
Telephone: 01543 899 317
Email: info@spokz.co.uk
Website: www.spokz.co.uk

Acknowledgements

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Lorna Couldrick, Senior Lecturer School of Health Professions (retired), University of Brighton and member of SH&DA

References

References used to support this document are available on request from:
Email: infofeedback@mndassociation.org

Or write to:
Information feedback, MND Association, Francis Crick House, 6 Summerhouse Rd, Moulton Park Industrial Estate, Moulton Park, Northampton NN3 6BJ
Further information

We have related information sheets you might find helpful:

7B - Tube feeding
8A-8E our range of sheets about breathing and ventilation
13B - Sex and relationships for partners of people with MND

You can also refer to our main guides:

Living with motor neurone disease – our guide to MND and how to manage its impact
Caring and MND: support for you – comprehensive information for family carers, who are supporting someone living with MND
Caring and MND: quick guide – the summary version of our information for carers

You can download most of our publications from our website at: www.mndassociation.org/publications or order in print from the MND Connect team, who can provide additional information and support.

MND Connect
Telephone: 0808 802 6262
Email: mndconnect@mndassociation.org
MND Association, Francis Crick House, 6 Summerhouse Rd, Moulton Park Industrial Estate, Moulton Park, Northampton NN3 6BJ

MND Association website and online forum
Website: www.mndassociation.org
Online forum: https://forum.mndassociation.org or through the website
We welcome your views

We’d love to know what you think we’re doing well and where we can improve our information for people with or affected by MND, or Kennedy’s disease. Your anonymous comments may also be used to help raise awareness and influence within our resources, campaigns and applications for funding.

To feedback on any of our information sheets, access our online form at: 
www.surveymonkey.com/s/infosheets_1-25

You can request a paper version of the form or provide direct feedback by email: infofeedback@mndassociation.org

Or write to:
Information feedback, MND Association, Francis Crick House, 6 Summerhouse Rd, Moulton Park Industrial Estate, Moulton Park, Northampton NN3 6BJ