Lecture 7

Sexuality

HEAL 101: Health and Lifestyle

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Objectives

- What is sexuality?
- Identify components of male and female human reproductive anatomy and physiology
- Discuss reproductive health issues that are specific to men and women
- Understand the menstrual cycle, pregnancy and birthing
- Compare the male and female sexual response cycles
- Classify sexual dysfunctions and describe each disorder

Sexuality - Advantages

- Procreation
- Intimacy
- Pleasure
- Self-validation
- Wellness
- Physical Health
- Inspiration
- Fulfillment of Sex Drive

Sexuality - Disadvantages

- Unplanned Pregnancy
- Infertility
- STDs and Cervical Cancer
- Complications from Contraceptives
- Sexual Assault and Sexual Abuse
- Conflict, Guilt and Heartache
What 18-24 Year Olds Think About Love and Marriage

Which of the Following Is An Essential Requirement for a Spouse?

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Attractiveness</td>
<td>19%</td>
<td>41%</td>
</tr>
<tr>
<td>Masculine/Feminine Traits</td>
<td>41%</td>
<td>72%</td>
</tr>
<tr>
<td>Well Paying Job</td>
<td>77%</td>
<td>25%</td>
</tr>
<tr>
<td>Intelligence</td>
<td>95%</td>
<td>88%</td>
</tr>
<tr>
<td>Ambition</td>
<td>99%</td>
<td>86%</td>
</tr>
<tr>
<td>Faithfulness</td>
<td>100%</td>
<td>97%</td>
</tr>
</tbody>
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The Ductus Deferens and Accessory Glands
Male Reproductive Health Issues
Cryptorchidism and Inguinal Hernia

Diagrammatical sectional view at representative stages of the descent of the testes.

Male Reproductive Health Issues
Vasectomy

Vasectomy

The Dynamic Human 2.0
Vasectomy
Other Male Reproductive Health Issues

- **Circumcision**
  - Removal of prepuce or foreskin
  - Not considered medically necessary

- **Benign Prostatic Hypertrophy**
  - Non-cancerous increase in the size of prostate - blockage of urethra results
  - Occurs in 80% of men over 80 years of age
  - Treated by Transurethral Prostatectomy

- **Prostatic Cancer**
  - Second only to lung cancer in cancer mortality in men
  - Similar threat as breast cancer in women
  - Prostate Specific Antigen (PSA) blood test is excellent screening tool
  - Digital Rectal Exam (DRE) also highly effective
  - Treated with radiation/prostatectomy - metastasis decreases survival rate
Hormonal Regulation

Ovulation and Egg Transport

Cleavage and Blastocyst Formation

Growth of the Uterus and Fetus
Female Reproductive Health Issues

- Tubal Ligation
- Path of egg (Uterine tubes)
- Ovary
- Uterus
- Cervix
- Vagina

- Endometriosis

- Ectopic Pregnancy
  - Misplaced pregnancy
  - Most are inside the uterine (Fallopian) tubes
  - Can also occur elsewhere
**Female Reproductive Health Issues**

**Twins**

- Multiple births can occur for several reasons.
- The ratio of twin births to single births is roughly 1:89.

"Fraternal," or ** dizygotic** (di–zi–GOT–ik), twins develop when two separate oocytes were ovulated and subsequently fertilized. Seventy percent of twins are dizygotic.

- "Identical," or ** monozygotic**. The genetic makeup of these twins is identical because both formed from the same pair of gametes. Complete splitting of the embryo can produce identical twins.

- If the separation is not complete, **conjoined** (Siamese) twins may develop. These infants typically share some skin, a portion of the liver, and perhaps other internal organs as well. When the fusion is minor, the infants can be surgically separated with some success. Most conjoined twins with more extensive fusions fail to survive delivery.

**Female Reproductive Health Issues**

**Amniocentesis**

In **amniocentesis**, a sample of amniotic fluid is removed and the fetal cells that it contains are analyzed. This procedure identifies over 20 congenital conditions, including Down syndrome. The needle inserted to obtain a sample of fluid is guided into position by using ultrasound. Unfortunately, amniocentesis has two major drawbacks:

* Because the sampling procedure represents a potential threat to the health of the fetus and mother, amniocentesis is performed only when known risk factors are present. Examples of risk factors would include a family history of specific conditions or, in the case of Down syndrome, a maternal age over 35.

* Sampling cannot safely be performed until the volume of amniotic fluid is large enough that the fetus will not be injured during the sampling process. The usual time for amniocentesis is at a gestational age of 14–15 weeks. It can then take several weeks to obtain results once samples have been collected; by the time the results are received, the option of therapeutic abortion may no longer be available.

**Male and Female Sexual Response**

**Figure 6.5.1**
Male and Female Sexual Response

3. Orgasmic Phase
- Contraction of vas deferens and seminal vesicles expel sperm and semen into urethra.
- Prostate expels fluid into the urethra.
- Uterus contracts.
- Orgasm platform contracts.
- Rectal sphincter contracts.
- Uterus shrinks, returns to its normal position.
- Cervix drops to its unaroused position.
- Vagina returns to its unaroused position.
- Clitoris descends to its unaroused position.
- Erection subsides.
- Scrotum thins, folds return.

4. Resolution Phase
- Testes descend.

Types of Sexual Dysfunctions
- Sexual desire disorders
- Sexual performance anxiety
- Sexual arousal disorders
- Orgasm disorders
- Sexual pain disorders

Prevalence of Sexual Dysfunctions

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Low desire</td>
<td></td>
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<tr>
<td>Arousal problem</td>
<td></td>
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<tr>
<td>Lack of orgasm</td>
<td></td>
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<tr>
<td>Rapid orgasm</td>
<td></td>
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<tr>
<td>Pain during sex</td>
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