Cognitive Behavioural Strategies

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In the beginning.................

1. Listen to the story along with specific details about their thoughts, feelings and behaviours
2. Find out their ‘goal’ or what they would like to achieve (challenge unrealistic expectations)
3. Psycho-education
4. Have a hypothesis
5. Identify detrimental behaviours
6. Provide constructive behavioural strategies

The brain

When you think of the amygdala, you should think of one word........ Fear. The amygdala is the reason we are afraid of things outside our control. It also controls the way we react to certain stimuli, or an event that causes an emotion that we see as potentially threatening or dangerous.

It is part of the limbic system which is responsible for emotions, survival instincts and memory.

Hot cross bun (Padesky & Mooney, 1990)

Situation
Meeting someone new

Cognitive
“I want to be someone different”
“I’m not normal”

Mood
Anxious

Behaviour
Tell lots of jokes, say “I sound weird” out loud

Physical
Butterflies in stomach, faster hear rate

Calming Down, Reducing Stress & Anxiety

Breathing Techniques

Apps
Smiling Mind
Headspace
Mood Maps

Yoga with Adrienne
Look around and find 5 things of different colour and name them

- Green plant
- Blue box
- Red wall
- White tables
- Brown chair

The continue to repeat: brown, white, green, red, blue. Repeat in your head or say them out loud if you prefer

- Sit on the edge of a chair (or any stable surface), put your hands on your knees while keeping your back straight. This forces you to keep your balance and feel more grounded to the world around you. At the same time find five colours and repeat them over and over again

• Lamont Classification described the following breakdown:

• First degree vaginismus as spasm of the pelvic floor that could be relieved with reassurance and the patient could relax for her examination.

• Second degree vaginismus, generalized spasm of the pelvic floor as a steady state despite reassurance, and the patient was unable to relax for the exam.

• Third degree vaginismus, the pelvic floor spasm was sufficiently severe that the patient would elevate her buttocks in an attempt to avoid being examined.

• Fourth degree vaginismus, the most severe form of vaginismus described by Lamont, the patient would totally retreat by elevating the buttocks, moving away from the pelvic exam, and tightly closing the thighs to prevent any examination.

• Fifth degree vaginismus (Dr Packik) as a visceral reaction manifested by increased adrenaline output and resulting in any of the following: Increased heart rate, palpitations, hyperventilation, trembling, shaking, nausea or vomiting, crying uncontrollably, a feeling of light headedness and fainting, a desire to jump off the table, run away or even attack the doctor.

Women

The Body Remembers Trauma
Bobette Rothschild

The Contribution of the Pelvic Floor Musculature to Dyspareunia

Pelvic-floor muscle hypertonus has been demonstrated to contribute to interstitial cystitis ([1], provoked vulvodynia ([2], and generalised vulvodynia ([3]).

Studies have demonstrated that pelvic floor muscle hyperactivity is a part of an overall response to heightened anxiety ([4]). Genital pain may also trigger pelvic floor dysenergia ([5]).

**Amy Stein ‘Stretching Exercises for Pelvic Pain’**

**Adductor Stretch**
1. Lie on your back with a pillow under your head.
2. Keeping your feet together on the floor bend your knees up.
3. Allow your knees to drop out to the side with the soles of the feet together. You should feel a gentle stretch on the inner thighs between the groin and inner knee. Place a pillow under each knee to provide support to begin with. Reduce the support to increase the stretch over a period of weeks.
4. Follow the deep, abdominal breathing technique protocol for 2 minutes.

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**Pelvic Floor Exercises for Women**

- ‘The Sexy twitch’
- ‘Anytime, Anyplace, Anywhere’
- Tense and ‘RELAX’ (double relaxing)
- Pelvic floor drop
- Use diaphragm breathing with pelvic floor exercises

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**Motivation for Sexual Activity**

- Love (intimacy)
- Desire
- Pregnancy
- Money
- Arousal
- Habit
- Fun
- Duty
- Sexual Activity

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**Arousal and orgasm**

**Men**

- Elevated sympathetic tone, increased noradrenaline/adrenaline concentrations and contraction of the penile smooth muscle cells.

**Performance Anxiety**

- I don't want to hurt her
- I'm a failure
- Stay hard
- He/She isn't enjoying this

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Gregory A. Sexual problems in older women. Int J Gynae 2012

Kirana E, Porst H. Erectile Dysfunction. The EFS & ESSM Syllabus of Clinical Sexology 2013
Erectile Dysfunction

1. Erectile dysfunction
   - Stop porn
   - Stop/Reduce masturbation
   - Encourage direct stimulation for men with ED but no porn/masturbation or who lose some rigidity at point of penetration
   - For those who can obtain an erection but then lose it – wax and wane and pelvic floor tensing ‘Sexy twitch’
   - ‘Spectatoring’ encourage focus on where the touch is happening – ‘pink submarine’
   - Gentle stimulation in the shower with focus on touch to explore sensations
   - The ‘Towner V’

Premature Ejaculation

• Ejaculation - Pelvic floor exercises
• Arousal - Buttock and pelvic floor relaxation prior to penetration
• A couple of deep breaths
• If always used porn – stop/reduce
• Slow down movement and use Bernie Zilbergeld’s ‘Stop Start’ for 10 mins
• Glans sensitivity – massage daily in shower with emollient
• If never masturbated could they ‘massage’ penis or masturbate
• Could masturbate earlier in day
• The ‘Quiet Vagina’
• Circular movement rather than thrusting

Pelvic Floor Exercises

• ‘The Sexy twitch’
• ‘Everyday Everyone’
• ‘Pleased to see you’
• ‘Tense and RELAX’

Simmering

‘The new male sexuality’ – Bernie Zilbergeld

Time Required: A few minutes a day

The next time you are aware of a sexual feeling, hang on to it for a few seconds. Get into the experience by imagining what you’d like to do with that woman or man you have in mind or have seen in the street, on- or off TV or by recalling in greater detail a previous fantasy of memory of a good experience. Imagine the touch of his/her lips, hands, breasts, etc. and run through your senses connect to your inner space. Run your own X-rated film. Continue this for a few seconds or even longer if you prefer. Then let the images slip away.

An hour or two later, close your eyes and get back into the images again for a few seconds.

Continue in this way every hour or two during the day, whenever you have a few seconds to spare.

One way of enhancing this exercise is to do a few pelvic floor exercises while you’re using your imagination.

Delayed Ejaculation

• Reduce/stop masturbation and stop porn (if this is indicated)
• Idiosyncratic masturbatory style – introduce masturbation with technique more akin to penetration
• Stop before intercourse becomes ‘hard work’ or less pleasurable for either partner
• Focus on your arousal ‘pink submarine’
• Use hand before, during (the ‘Towner V’) or after penetration
• Relaxation – check breathing

Couples
For people in a relationship

1. ‘How do you’ contribute to the difficulties you have in your sexual relationship
2. What are your ‘Habits and Routines?’
3. ‘Best 10 minutes of relationship advice ever’ Dr Jorden Peterson
4. ‘Rules of a row’
5. Regular planned time to ‘talk and listen’ with negotiated boundaries

What are your conditions?

• Compare two or three sexual experiences in which you were highly aroused with an equal number when you were much less aroused and list the factors that differ between the two.

• Make a list, over a period of days or weeks, of things you’d like in sex that you’re not getting. Use fantasy and past experiences. Are there things you used to do that you miss? Are there things you would like to try?

Sexual Physiology:
‘The Dual Control Model’

• Sexual Excitation System
  1. SES - the “gas”, responds to sexually relevant stimulus in the environment

• Sexual Inhibition System
  1. SIS-1 - the “handbrake”, the chronic, trait level inhibitory tone
  2. SIS-2 - the “footbrake”, the inhibitory system that responds to “threats in the environment

• People have different levels of SES and SIS just like they have different eye colour

Sexual Positions
And finally......... my favourite books & websites

And finally......... my favourite books & websites

www.omgyes.com
www.vaginismus.com
www.yourbrainonporn.org
www.lovelanguages.com
www.nofap.org
www.cci.health.wa.gov.au