Intimacy and touch help you both emotionally and physically to manage your IC, and sexual touch keeps you bonded with your partner. There are many ways to remain sexually active or resume your sex life, and there are treatments that can help.

Open Communication Lines

- **Be honest with your partner.** Let your partner know if any activity is painful, but reassure your partner that, with some adjustments and treatments, both of you can have satisfying intimacy.

- **Raise your concerns with your healthcare provider.** Ask about pretreatment programs such as strategically timing your medicines. Also, find out about “premedicating” with topical numbing agents, intravaginal or intrarectal muscle relaxants, short acting anticholinergics, or visiting the office the day of a planned encounter for trigger point injections, bladder instillations, and pain medicines.

- **Bring your partner to your appointment.** If you think it will be helpful, bring your partner to your next medical appointment to help explain how IC affects your sex life.

- **Find out about physical therapy.** Ask your doctor about a physical therapy consult. Exercises designed to stretch the pelvic floor can help, as can relaxation exercises.

- **Ask for a referral to a sexual health therapist.** There are many satisfying ways to have “sex” and to ease pain with sex. A sex therapist or sexual medicine specialist can help.

- **Talk with other people with IC.** Reach out to others through support groups and online forums. Visit [www.ic-help.org](http://www.ic-help.org) to find a support group meeting in your area. Or, you can ask privately about strategies that worked for other patients by joining online forums such as the [www.ic-network.com](http://www.ic-network.com).

Plan Ahead

- **Plan your encounters.** Aim for the day before your next healthcare provider appointment or physical therapist. That way, you can get immediate help with advice, prescriptions, instillations, or other treatments.

- **“Test drive” products and activities.** If you want to use a new lubricant, first test a small amount to be sure you can tolerate it before you use it during sex. Ask your healthcare provider if your pelvic floor and bladder pain are quiet enough for you to tolerate external stimulation or penetrative sex. If you’re unsure, test whether you can tolerate an orgasm yourself before you try with your partner.

- **Get ready with vaginal dilators.** Talk to your healthcare provider about using a series of vaginal dilators, increasing them in size, over time to help prepare for penetrative sex. Then, you’ll know if it’s likely to be comfortable.

- **Relax your body.** Sexual activity is more comfortable when muscles are relaxed. Take a hot bath, stretch, do your home physical therapy exercises, practice meditation, or use relaxation techniques.

- **Avoid flare triggers.** Restrict foods and drinks that trigger flares. And, hold off on lovemaking until you have an empty bladder and stomach.

- **Take your medicines beforehand.** Time your pain medicine, muscle relaxants, bladder instillations, or other therapies to have maximum effect at the time of your planned sexual encounter. Use lidocaine gel for numbing or suppositories with muscle relaxants.
Adapt Your Sexual Technique

- **Flirt.** If you don’t already, add flirting to your repertoire as a means to increase your arousal before sex.
- **Chat.** Sex talk can also help arouse partners. Letting your partner know what feels good can add enjoyment for both of you.
- **Make sex a whole-mind and whole-body experience.** Explore intimate touch that feels good and focus less on orgasm as the goal.
- **Use “outercourse” techniques.** Join together in a “spoon” position or with your partner’s genitals resting on top of the pubic area or between a woman’s thighs, breasts, or buttocks. Rubbing bodies together can bring arousal and even orgasm for one or both partners.
- **Attempt orgasm without penetration.** If orgasm is okay but penetration is not, try manual or oral stimulation. Mutual masturbation can be satisfying for both participants.
- **Go slowly.** If you are resuming intercourse after a respite, start slowly. First, try penetration only and no thrusting. If that causes no flare, progress to gentle rocking.
- **Be adequately aroused before attempting penetration.** The more aroused the better before attempting penetration. Natural arousal relaxes the vagina and pelvic floor muscles, but lubricants can help as well.
- **Try alternative positions.** For men or women with IC, a side-by-side position may be most comfortable. For woman, being on top and leaning forward may be comfortable. Men with IC may also be comfortable standing with the partner lying down.
- **Encourage yourself and your partner.** Make a mental note about what worked for you. Let your partner know what felt good and excited you.

Take Care of Yourself After Intimacy

- **Cool off.** Use a cool pack on the vulva or perineum. Ask your healthcare provider or physical therapist about internal cool packs. For example, the finger of a surgical glove filled with chilled water.
- **Numb up.** Use lidocaine gel on the vulva, vagina, or penis to ease burning.
- **Medicate.** Take a dose of pain medicine or a muscle relaxant, or use your internal muscle relaxant suppository.
- **Give your pelvic floor time to relax.** After sex, some IC patients can’t start a urine stream. This usually goes away after a short while when the pelvic floor relaxes. A warm bath can help.
- **Follow-up with your healthcare provider.** Let your healthcare team know what is working—and what is not working. Ask what you can do to decrease any pain or distress associated with sex.

The Interstitial Cystitis Association (ICA) is the only non-profit health association dedicated to improving the quality of healthcare and lives of people living with interstitial cystitis (IC).

The ICA provides advocacy, research funding, and education to ensure early diagnosis and optimal care with dignity for people affected by IC.

Your donation dollars also enable the ICA to continue to fund new IC research projects, as well as work closely with Congress to ensure ongoing IC-specific research funding at the federal level.

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