

Herbs, Amino Acids, And Female Libido

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Q: Several female patients who I see for urinary concerns complain about a lack of sexual desire. Many feel uneasy about taking hormones to increase desire, but they've asked me about "natural" products that might enhance their sexual interest level. Can you comment on this?

A: Many of my patients voice similar questions. Most of the prosexual agents in the "natural" category are available over the counter (OTC). I agree with you that it is important for nurses and practitioners to know about these products and to be able to suggest or discourage the use of specific ones. These include ArginMax, yohimbe, DHEA, EROS-CTD, exercise, and phytoestrogens.

'Natural' Products

ArginMax. This is an oral dietary supplement that contains several "natural" substances. One ingredient is L-arginine, an amino acid which is the precursor to nitric oxide. Nitric oxide mediates relaxation of vascular and nonvascular smooth muscle in the clitoris and vagina; damiana, an African shrub that is considered by some to be a powerful aphrodisiac for women because of speculation that it enhances dopamine levels in the brain; and ginseng, an herb that has no direct prosexual effects, but has been associated with increased energy and stamina.

Preliminary double-blind, placebo-controlled studies of oral supplements containing L-arginine and damiana have demonstrated that up to 70% of pre and postmenopausal women experience significant improvement in desire and sexual responsiveness after 4 to 6 weeks of daily use (Trant & Polan, 2000). This supplement is widely available in general nutrition, health food, and drug stores throughout the United States. Beyond being slightly stimu-

latory, ArginMax has few side effects. It should be noted that women who have a history of herpes simplex virus should be aware that high doses of L-arginine can potentiate oral and/or genital herpes outbreaks.

The active ingredients in ArginMax are also sold separately at most health food stores. Although placebo-controlled studies on the use of damiana alone are lacking, anecdotal reports of the effectiveness of daily ingestion of a cup of damiana tea for increasing female sexual desire are widespread (Ratsch, 1997; Watson, 1993).

L-arginine, which contains topical creams and is marketed under the names "Alura" and "Dream Cream," is reported to enhance female orgasm and has an indirect positive effect on female desire (Youngworth, Chek, & Zaslau, 2001).

Yohimbe. This popular prosexual herb for males is thought to increase nitric oxide production in females through alpha-adrenergic blocking effects. One study compared a combination of yohimbe 6 mg and arginine glutamate 6 g with placebo in 23 postmenopausal women. Sixty minutes after administration, the women assigned to active treatment experienced statistically significant increases in vaginal pulse amplitude and subjective responses to erotic stimuli (Meston & Worcel, 2000).

DHEA. Standardized dehydroepiandrosterone (DHEA), an androgenic hormone precursor to testosterone that is secreted by the adrenal gland, is available at most health food stores. In a recent study, 136 women aged 27 to 47 received DHEA 25 mg twice daily or placebo for 6 to 10 months. Most DHEA recipients reported a statistically significant increase in sexual desire during treatment. Fewer than 10% of DHEA recipients experienced side effects, which included acne, facial hair, weight gain, breast tenderness, and hair loss. Yams and the herb sarsaparilla are natural sources of DHEA (Munariz, Talakoub, & Garcia, 2001).

EROS-CTD. This hand-held suction device is attached to a small plastic cup that fits over the clitoris for the purpose of increasing blood flow and sensation to the female genitals. It is the first device approved by the Food and Drug Administration for female sexual dysfunction, and it is available by prescription. The cost is approximately \$400 and

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presently it is not reimbursed by all health insurance carriers.

Although the purpose of this product is to increase arousal and orgasm, several participants in one study experienced increased sexual desire after 4 weeks of daily use for 10 minutes/day (Billups et al., 2001).

Exercise. Regular physical exercise, particularly types that increase circulation to the lower extremities (such as cycling, running, yoga) can greatly increase sexual desire in women. In addition to increasing genital blood flow, exercise promotes a positive body image (Watson, 1993).

Phytoestrogens. These substances, which are found in plants, increase circulating estradiol levels and enhance blood flow to the genitals. Common herbs that purport to increase female desire include don quai, licorice root, black and blue cohosh. These herbs are often present in “over-the-counter remedies” for female menopausal symptoms. Many women assume that because these substances are “natural,” they do not carry the risk of other types of estrogen and do not alter serum hormone levels. Educating women that phytoestrogens are estro-

gens, and that hormone precursors *are* hormones (and should be monitored as such) is an important step toward helping them make informed decisions about their sexual health (Ratsch, 1997). ■

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