Sexual activity is an important part of quality of life and is often a great concern for both patients and their partners after a cardiac event. Fears and concerns may temporarily interfere with sexual spontaneity and response.

A few factors may interfere with your sexual health after your discharge from the hospital. You might temporarily suffer from mild depression, which will affect your sexual desire. Some medications may also impact sexual function. You might fear that sexual activity will cause another heart attack or your spouse might silently think the same. For the majority of patients, this will last a short period of time and life will pick up where it left off before you had a cardiac event.

There are also some unique difficulties that men and women may face. For example, erectile dysfunction (ED) is often associated with heart disease in men. The same factors that contributed to blocking the arteries of your heart can block arteries elsewhere in your body. Some medications may also contribute to ED. A healthy lifestyle that incorporates a heart healthy diet, exercise and reaching a healthy weight has been shown to correct ED in 30% of obese patients.

Women may face difficulties with several aspects of the sexual response cycle, including desire, arousal, and orgasm. Women may avoid intercourse due to pain caused by decreased blood flow or friction resulting from not enough lubrication. Over-the-counter lubricants can often address this concern and prevent further problems in the sexual and interpersonal relationship from developing.

Many of the sexual difficulties that people face after a heart attack, however, stem from just not knowing enough about whether they can safely have sex again.

**When is it safe to engage in sexual activity after a heart attack?**

If you have recently had a heart attack, your doctor will likely recommend that you wait up to 6 weeks before resuming sexual activity. After this healing period, the risk of having a heart attack during sex is actually quite low. The risk is comparable to that of getting angry and is reduced if you exercise regularly and take your medication.

From a cardiac standpoint, sexual intercourse is like any other physical activity; your heart rate and your blood pressure increase. The effort on your heart is about the same regardless of your position. The activity is often compared to walking at three to six kilometers per hour on a level surface, or climbing 20 stairs in 10 seconds. However, each individual may have different physical factors to consider. It is important to always talk to your cardiologist/family physician before resuming sexual activity.
How can psychological strategies help to maintain my sex life after a heart attack?

- **Start slowly and have realistic expectations.** The first few weeks after a heart attack can be very stressful on your partner and yourself. Both of you might still be tired. Plan sexual activity for the time of day when you have the most energy and are least bothered by other health issues. You might also want to avoid having sex after a large meal. Give yourself a few hours to digest. Similarly, limit the amount of alcohol you drink and avoid using tobacco as both of these may affect sexual function. If you have chest pain or shortness of breath, speak to your doctor.

- **Physical affection without sex is just as important.** Explore your senses: hold hands, hug, and touch your partner. Create a bit of romance with music, candles, and special scents. You can also maintain emotional closeness by doing things like having regular date nights.

- **For anyone, communication is key to an enjoyable sex life, and this is especially true after a heart attack.** Agree to have honest discussions. Tell each other what you like and don’t like. If you are experiencing some communication difficulties in your relationship, meeting with a psychologist can help to improve communication skills.

- **There are many factors that can affect desire,** including fatigue, fear/anxiety, depression, pain/physical discomfort, and drug-related sexual side effects. If you are experiencing any of these additional issues, it can be helpful to meet with a psychologist to specifically treat these related difficulties.

Where can I get more information?

*Thriving with Heart Disease: A Unique Program for You and Your Family. Live Happier, Healthier, Longer* - by Sotile & Cantor-Cooke (includes a chapter specifically on sexual functioning)

Heart and Stroke Foundation of Canada: [www.heartandstroke.com](http://www.heartandstroke.com)

Canadian Association of Cardiac Rehabilitation: [www.cacr.ca](http://www.cacr.ca)

Sex Information and Education Council of Canada (SIECCAN): [www.sieccan.org](http://www.sieccan.org)

The Society of Obstetricians & Gynaecologists of Canada: [www.sexualityandu.ca](http://www.sexualityandu.ca)

You can consult with a registered psychologist to find out if psychological interventions might be of help to you. Provincial, territorial and some municipal associations of psychology often maintain referral services. For the names and coordinates of provincial and territorial associations of psychology, please visit: [www.cpa.ca/public/whatisapsychologist/PTassociations/](http://www.cpa.ca/public/whatisapsychologist/PTassociations/).
This fact sheet has been prepared for the Canadian Psychological Association by Dr. Heather Tulloch, University of Ottawa Heart Institute, Dr. Hannah Marchand, Kingston Orthopaedic and Pain Institute, and Dr. Michele de Margerie (physician), University of Ottawa Heart Institute.

Revised: December 2011

Your opinion matters! Please contact us with any questions or comments about any of the Psychology Works Fact Sheets: factsheets@cpa.ca

Canadian Psychological Association
141 Laurier Avenue West, Suite 702
Ottawa, Ontario K1P 5J3
Tel: 613-237-2144
Toll free (in Canada): 1-888-472-0657