

## **Lisa Vicente**

### **BIOG**

- Medical doctor- Member of the Portuguese Order of Physicians (1993). Gynecology-Obstetrics Specialist (2003). Post-Graduation on Sexual Medicine (2005). Consultant Gynecologist & Obstetrician (2015). Medical Competence in Clinical Sexology Portuguese (2015).
- Responsible for the Reproductive Health Care Out-patient Clinic at the Portuguese Diabetes Association since 2003.
- Clinical Practice in Obstetrics and Gynecology in public hospitals, mainly obstetrics and diabetes clinic (2003 -2009 and 2016 until now).
- Head of the Division of Sexual Health, Reproductive Children and Youth of Directorate-General of Health (2009-2016).
- Board Member of Clinical Sexology Competence of the Portuguese Board of Physicians (since 2016). Member of the board of the Portuguese Clinical Sexology Society. Member of the International Academy of Sex Research (IASR).
- Responsible for the organization and active participation on Training Courses for health professionals and educators in the area of sexual health, sexuality, reproductive health, diabetes, Female Genital Mutilation (FGM) and abortion.
- Author and co-author of several scientific publications and book- chapters. Participation in media publications for active information on sexual health, reproductive, diabetes care and FGM.

### **ABSTRACT**

#### **Sexuality and diabetes**

Human sexuality is conditioned by a plurality of determinants that are in constant and dynamic interaction. Although these factors are typically divided in large groups, it is important to recognize that they have an interconnected and simultaneous action in the individual, and that they cannot always be systematized into separate groups.

During the presentation, we will speak about:

-Biological factors: including age, general state of health and of the genitourinary system in particular. The late complications of diabetes may cause dysfunction or lesion of the genitourinary system, interfering in the sexual response; poor metabolic control may have repercussions on general well-being or on the individual's body image. The use of certain drugs may negatively influence both the individual's general well-being and the sexual response.

-Psychological factors: the type of affective-sexual learning acquired the characteristics and outcome of previously experienced relationships, the person's beliefs and attitudes towards sexuality, self-image and self-esteem are psychological factors that modulate sexual interaction at every moment. Depression is more frequent in chronic patients and in women.

-Socio-cultural factors: these include norms and attitudes that each society, social class, or ethnic subgroup establish as "correct" or "suitable" in sexual relationships. Additionally, information and health care available are socio-economic aspects that influence the way individual sexuality is experienced.

It is important that health professionals are aware of the importance of addressing questions on sexuality when caring for men and women with diabetes. Sexual health as part of global health care should be a new paradigm.