Premature Menopause And Vaginal Disease: The Concern Of Lubricating The Internal Woman’s Mucosa Considered By The Man’s Point Of View And Keeping On Account Even His Degree Of Satisfaction.

Lorenzo Martini¹, Piotr Brzezinski²

¹Department of Pharmaceutical Biotechnologies, ²Institute of Biology and Environmental Protection, Pomeranian Academy

Corresponding Author: Lorenzo Martini

Abstract: premature menopause or Menopausa praecox is a syndrome that could afflict more women than one could imagine: causes are several and woman is always unhappy and dissatisfied. Manifold are the lubricants for vagina that are retrievable all over the world, although they are made up with different solvents, aqueous or oily or are solutions of gum resins that sometimes can result sticky. Nobody has never focused his attention of the quality of sexual intercourse considering it by the side of the man who has to have the sexual encounter with a woman suffering from menopause. Here we have attempted to lose the problem, trying to consider the man’s concern in this trouble and the results are very encouraging.

Keywords: Premature menopause, asthma, vaginal dryness, estrogen therapy, xanthan gum

I. Background

When we use the term “premature menopause” or climacterium praecox, we mean cessation of the normal cyclic ovarian function prior to the age of 40. Some authors have defined the limit at an even earlier age, namely 35 and in some cases even 30 [1]. Especially in young women, speaking of a premature menopause often causes problems for psychological reasons. The thought of being menopausal at such an early age produces worries and fears in many of the patients, especially if they still want children. Since a premature menopause may sometimes be transient, it is probably more acceptable to the younger patients if the term “hypergonadotropic amenorrhea” is used. (1-6)

Amongst the possible autoimmune disorders that could cause hypergonadotropic amenorrhea and premature menopause (7)

Acquired hemolytic and pernicious anemia
Asthma
Chronic active hepatitis
Crohn’s disease
Diabetes mellitus
Glomerulonephritis
Addison’s disease
Hypoparathyroidism
Hypophysitis
Idiopathic thrombocytopenic purpura
Juvenile rheumatoid arthritis
Sjögren’s syndrome
Malabsorption syndrome
Primary biliary cirrhosis
Systemic lupus erythematoses (SLE)
Thyroid disorders, including Grave’s disease
Thyroiditis
Vitiligo
Alopecia

During menopause, estrogen production slows and then stops. When this happens, a number of changes -- many of them unwelcome -- happens in a woman's body. Periods become irregular and then stop. Vaginal dryness could be considered the chief culprit of menopausa praecox, that thonds to inhibit whichever sexual intercourse because
Premature menopause and vaginal disease: the concern of lubricating the internal woman’s mucosa

of pain and itching during the intimate relationship. Vaginal dryness also can occur at any age from a number of different causes. It may seem like a minor irritation. Fortunately, several treatments are available to relieve vaginal dryness.

Normally, the walls of the vagina stay lubricated with a thin layer of clear fluid. The hormone estrogen helps maintain that fluid and keeps the lining of the vagina healthy, thick, and elastic. During menopause, the drop in estrogen levels reduces the amount of moisture available. It also makes the vagina thinner and less elastic. This is called vaginal atrophy.

In addition to menopause, estrogen levels can drop from:
- Childbirth and breastfeeding
- Radiation or chemotherapy treatment for cancer
- Surgical removal of the ovaries
- Anti-estrogen medications used to treat uterine fibroids or endometriosis

Other causes of vaginal dryness include:
- Sjögren’s syndrome
- Allergy and cold medications and certain antidepressants

Douching
- Lack of enough foreplay before sexual intercourse

No matter what the cause, vaginal dryness can be extremely uncomfortable. It can lead to itching, burning, and painful intercourse.

The most common treatment for vaginal dryness due to low estrogen levels is topical estrogen therapy. Topical estrogen replaces some of the hormone woman’s body is no longer making. That helps relieve vaginal symptoms, but it doesn't put as much estrogen in the bloodstream as oral estrogen hormone therapy (HT). Lubricating agents represent a very “Eldorado” for women after menopausal syndrome, even if several problems can occur during these applications.

There are lubricants based on emulsions W/O, silicone or very diluted aqueous solutions containing gum resins that helps the adhesion of condom during the intercourse, since the sensation of clammy and desmeared vaginal mucosae that tend to permit the frication with latex of the condom.

Gum resins, as they are natural, need always a microbicide, even in lowest dosage, to avoid fermentation and occurrence of bacterial infection.

Gum resins must be chosen in order to maintain pH milieu mildly acidic, in order to not yield even fungal complications.

Antimicrobials may be even natural as Melaleuca alternifolia, Ginger extract, Manuka honey or Pau d’Arco, that is used in its original countries as a specific antidote against Candida albicans.

The gum resin (a solution extremely diluted, 0.5% with addition of 1% of olive oil) is xanthan gum, since it is rheologically pseudoplastic and so easily spreadable and it is sufficient citric acid 1% to maintain an acidic pH.

The importance of resolving the problem of vaginal dryness is not simply the lubrication: each woman is capable to use, before sexual intercourse, whichever fat or silicone (even recent studies have amply demonstrated that silicone, for the fact that acts as a mackintosh with regards of the vaginal mucosa, does not elicit the osmotic regular metabolism inside the vaginal mucosa, letting the proliferation of bacteria.).

The scope of lubricating a dry vagina is the perennial use of the jelly, both in order to avoid infections and for facilitating sex.

Vaginas that are too greasy may result disconfortable for man who likes to have an intercourse with the woman and the results could sometimes be embarrassing for man, since his penis can slip out from vagina during the encounter and thus can go flaccid.

Other gum resins, as locust bean or agar agar are too sticky and penis, both covered by a condom or naked, may remain wedged in the vagina. Our solution comprehends:
- 0.5% xanthan gum
- 1% crude olive oil
- Water q.s.

Another great concern to be kept in serious consideration is itching, especially during the night, and the only remedy is to alternate the feeling of cool and fresh, in order to avoid internal pruritus.

Over the last 30 years a considerable number of compounds have been synthesized and evaluated for the physiological sensation of “cooling”.

In the 1970’s Wilkinson Sword Ltd. conducted an extensive research program under the company leadership of Roy Randolph. During this period Hugh R. Watson and co-workers designed and evaluated about 1200 compounds for their cooling activity (8-14). The interest in such compounds relates to cooling sensation...
without the minty and volatile side effects of menthol such as eye irritation from aftershave lotions, or irritation in vagina or urethra in man. Of these original Wilkinson Sword compounds, the most fabulous to satisfy our concern has now been successfully commercialized as WS-23 (2-Isopropyl-N,2,3-trimethylbutyramide). Millennium describes WS-23 as an almost odorless white powder. It is characterized by a high cooling activity with no side effects such as burning, stinging or tingling sensations. Typical applications include use as a coolant in medicinal preparations, oral care products and confectionery products. WS-23 (for medical scopes) is available nowadays, its odour is slightly minty, even if it reminds Mentha viridis and not Mentha spicata (typical of all the jellies for lubricating vagina).

Its usage is quite minimal and the other compound that must alternate the warm effect in the vaginal mucosa
Of the three forms of mucosal stimulation subject to thermal modulation, chemical irritation, or "chemesthesis", is the most vulnerable. By their nature, the sensory endings that mediate chemical irritation (noreceptors) are temperature sensitive. As a consequence, changing the temperature of the stimulus and mucosa can drastically affect the sensitivity to an irritant. This effect has been most clearly demonstrated for capsaicin, the pungent compound in chili pepper. Nevertheless an avalanche of natural agents that act as hot enhancers onto internal mucosae and can be inserted in formula:and they are even tasty. Baharat: means spices in Arabic, and this premium blend has a complex balance of spicy flavors. savory and slightly hot.

Berbere - Spicy Ethiopian Blend Extra Hot Cajun, made with jalapeno powder, is for serious lovers of warmth onto body Jamaican Jerk:rich and savory with a little kick of heat, this blend is essential for producing the sensation of warmth.

Milwaukee Iron.
All these spices do not contain pepper and so cannot irritate vaginal mucosa even if can yield a sensation of warmth, sometimes intense, but that can alleviate by the alternance with WS 23.
Their usage and dosage must be severely scrupulous.
In addition to the gum resin and the mix olive oil-water we have used 0.5% of WS23 and 0.7% of Jamaican jerk.

II. Marterials and methods
We have recruited a woman 38 y.old who suffers from menopausa praecox because of her asthma and an incipientt diabetes mellitus. She declared a continuous feeling of itching and pain during sexual intercourses, it must be considered that she had tried all types of liwquid wax, as jojoba oil, or carnauba wax, mixed with macadamia oil, since it is not soluble in water in order to accomplish her sexual necessities, although the results when she had sexual intercourses with men was fully regrettable.

The volunteer has been spread directly using her cleaned hands our lotion (made of xanthan gum, lìlve oil, water, Millennium WS-23 and Jamaican jerk) almost five-six times a day and since she has a fiancé, she has had the chance to try her sexual relation with her companion for several days, using or not using a latex condom. She resulted very satisfied right after the third day of application. The lotion does not spoil or grease her underwear. Itching disappeared after the second day. But the most important ascertainment is that is the companion who is content and happiest for this lucky resolution.

III. Discussions and conclusions
We really deem that this typology of lotion could be used at every age of the woman, even if she does not suffer from vaginal dryness due to pathological causes, but only because of physiological senescence. It is rare to find cosmetic or pharmaceutical products apt to this scope that are able to make the partner content and appeased.

References

DOI: 10.9790/3008-1204064346 www.iosrjournals.org 45 | Page