

Frequency of Genitourinary Syndrome of Menopause Symptoms in Chinese-Speaking Sex Workers Attending an Urban Sexual Health Clinic in Sydney, Australia

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genitourinary syndrome of menopause (GSM) and undertook a research project to further explore this issue.

MATERIALS AND METHODS

This cross-sectional survey was community co-designed with SWOP, with input from clinic clients and healthcare workers. Clinic clients were eligible to participate if they were Chinese-speaking, cisgender females, 45 years or older, and currently sex workers. Participants were invited to complete an anonymous online survey in simplified Chinese, which assessed demographic information, use of contraception, menstruation patterns, work satisfaction, impact of GSM symptoms on ability to work, comfort engaging with GSM related care and information, Personal Wellbeing Index (PWI) scale items, Modified Greene Climacteric Scale (GCS), and questions from the GSM Symptoms and Vaginal Treatment Acceptability Questionnaire (GSM-SVTAQ). Participants were compensated with 20 AUD for their time.

BACKGROUND AND AIMS

Sydney Sexual Health Centre (SSHC) is a publicly funded sexual health clinic for clients from key priority populations who are seen free of charge, regardless of citizenship or health insurance status. SSHC provides a dedicated sexual health clinic for Chinese-speaking sex workers and works closely with a key community partner, the Sex Workers Outreach Project (SWOP), an organisation led by and for sex workers.

More than half the of sex workers attending the Chinese language clinic are aged 45 years and over, and many report vaginal dryness/painful sex.^{1,2} The authors postulated that sex workers are especially likely to be impacted professionally by

RESULTS

Seventy-three eligible patients participated in the study. Median age was 54 years (interquartile range: 50–58; range: 45–63). The majority of participants were either post-menopausal (47 participants; 68.1%) or peri-menopausal (13 participants; 17.8%).

Of these perimenopausal and postmenopausal patients, 49 (83.1%) reported symptoms consistent with GSM. Of those with GSM symptoms, 45 (91.8%) reported any vulvovaginal symptoms, 43 (87.8%) any urinary symptoms, and 43 (87.8%) any sexual symptoms.

The five most commonly reported GSM symptoms were loss of libido, followed

by loss of lubrication, vaginal dryness, nocturia, and dyspareunia.

CONCLUSION

To the authors' knowledge, this is the first study to describe the prevalence of menopause and GSM in sex workers, highlighting a need for culturally sensitive, accessible healthcare services to address their menopausal health concerns.

Findings from this study inform the development of a new menopause service for sex workers, which will be evaluated

through a cohort study measuring the effects of this service on client symptoms, quality of life, and ability to work.

References

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