THE #METOO MOMENT: SECOND THOUGHTS ON THE SEXUAL REVOLUTION

A timely conversation with distinguished experts in law, medicine, and psychology

A program of the Ethics and Public Policy Center
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Second thoughts: Health consequences of the sexual revolution

Monique Chireau Wubbenhorst, MD, MPH
Duke University School of Medicine
Department of Obstetrics and Gynecology
Durham, NC
Disclaimers

• I have no affiliations with industry.
• I received no compensation in preparing this presentation.
• This presentation does not represent the opinions of Duke University.
The sexual revolution was characterized by significant changes in...

• Sexual behaviors
• Women’s fertility strategies e.g. contraception and abortion
• Relationships between the sexes
...which have had short- and long-term effects on women’s health

• What are some of these changes?
• What are the consequences?
• How does this speak to the #MeToo moment?
Changes in sexual behavior have consequences for women’s health

• Increased rates of sexually transmitted infections and disease
  • Gonorrhea
  • Chlamydia
  • Syphilis
  • Human papillomavirus (HPV)

• Changes in sites of infection
  • Mouth/throat, anus, colon and rectum
Changes in women’s fertility strategies have consequences for women’s health

• Increased use of contraception and abortion
• Delayed childbearing
• Infertility
Changes in relationships between the sexes have consequences for women’s health

• An increase in casual, exploitative and/or abusive sex (often driven by use of pornography)
  • Decreased sexual satisfaction
  • Increased sexual exploitation
  • Commodification not only of sex, but of women themselves
  • Piercing, shaving and genital surgery
Changes in sexual behavior have consequences for women’s health

• Increased rates of sexually transmitted infections and disease
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  • Chlamydia
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• Changes in sites of infection
  • Mouth/throat, anus, colon and rectum
Sexually transmitted disease surveillance – Chlamydia, 1984-1998

Figure 1. Chlamydia – Rates by gender: United States, 1984–1998

Rate (per 100,000 population)

- Men
- Women
Sexually transmitted disease surveillance – Chlamydia, 2000-2016

Rate (per 100,000 population)

- Men
- Women
- Total

Year

Changes in sexual behavior have consequences for women’s health

• Sexually transmitted infections are associated with both short- and long-term effects on women’s fertility
  • Gonorrhea and *Chlamydia trachomatis* infections can cause pelvic inflammatory disease (PID), with tubal damage and infertility
    • Tubal factor infertility is the most common cause of female infertility (25-35%)  
    • The most common cause of tubal factor infertility is pelvic inflammatory disease and Fallopian tube infection (>50%)
    • A high proportion of *in vitro* fertilization procedures are performed for tubal factor infertility
Changes in sexual behavior have consequences for women’s health

- There is evidence (though conflicting) that *Chlamydia trachomatis* infection may also lead to increased risk for miscarriage\(^1\)
  - Infection with *C. trachomatis* may cause the production of antibodies to microbial heat shock proteins (Hsps); these microbial proteins share similarities with human heat shock proteins, which are produced by human embryos
  - In mouse models, antibodies to Hsps impair embryo formation, indicating a potential mechanism for miscarriage in humans\(^2\)
  - These findings may have significant implications for women (especially adolescents) who become infected with *C. trachomatis*.

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Changes in sexual behavior have consequences for women’s health

• Beyond pelvic inflammatory disease
  • *Chlamydia trachomatis* infection in men may also be associated with increased risk for infertility
    • Prior *Chlamydia* infections in a male partner are associated with the presence of antibodies in their female partners
    • These may increase risk for “sexually transmitted infertility”³

Changes in sexual behavior have consequences for women’s health: HPV

- Human papillomavirus (HPV) infection is the most common sexually transmitted disease in the United States and is associated with oral, penile and cervical cancer
Changes in sexual behavior have consequences for women’s health: HPV

• The incidence of oropharyngeal cancer has been increasing in recent years due to increasing rates of HPV infection. This is felt to be associated with changes in sexual practices.

• At the 2013 Annual Meeting of the American Society for Radiation Oncology, Farzan Siddiqui, MD, PhD, of Henry Ford Hospital in Detroit, Michigan, noted: “The growing incidence in oropharyngeal cancer has been largely attributed to the sexual revolution of the 1960s and 1970s, which led to an increased transmission of high-risk HPV” [emphasis added]⁴,⁵

Changes in sexual behavior have consequences for women’s health: HPV

- HPV is also associated with rectal and possibly colorectal cancer\(^6,7,8\)
- 3 in 10 new diagnoses of rectal cancer now occur in adults < 55 years of age\(^9\)
- The possible association with HPV is noteworthy given the newly observed epidemic of GI cancers in young adults


Changes in sexual behavior have consequences for women’s health: HPV

• Women with cervical HPV and dysplasia (abnormal cells) are more likely to have anal dysplasia

• As a result women may be at increased risk for anal or colorectal cancers due to the association between cervical HPV infection with dysplasia, and anal dysplasia
  • As an aside, pornographic movies frequently feature anal and anal-to-oral sex
  • Anal sex may also be seen as a means of preventing
Changes in sexual behavior have consequences for women’s health: HPV

- HPV is not only associated with squamous lesions of the cervix, but also with the more dangerous glandular dysplastic lesions, and adenocarcinomas.
- Non-high-risk HPVs are also associated with cervical cancers.
What is the epidemiological evidence for increases in STI rates since the sexual revolution?

• Example: California
Diagnoses of sexually transmitted diseases hit a record high in California last year — with sometimes deadly consequences, according to preliminary state data released this week.

More than 300,000 cases of gonorrhea, chlamydia and syphilis — the most common sexually transmitted bacterial infections — were reported in 2017.
Sexually Transmitted Diseases Soar

Rates of infection per 100,000 Californians

<table>
<thead>
<tr>
<th>Year</th>
<th>Syphilis*</th>
<th>Gonorrhea</th>
<th>Chlamydia</th>
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<tbody>
<tr>
<td>2013</td>
<td>17</td>
<td>100</td>
<td>438</td>
</tr>
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<td>2014</td>
<td>19</td>
<td>116</td>
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<td>139</td>
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</tr>
<tr>
<td>2016</td>
<td>29</td>
<td>164</td>
<td>504</td>
</tr>
<tr>
<td>2017</td>
<td>34</td>
<td>191</td>
<td>552</td>
</tr>
</tbody>
</table>

*This is a measure of early syphilis, a combination of primary, secondary, and early latent stages of the disease, but does not include congenital syphilis.

Source: California Department of Public Health
Congenital Syphilis And Stillbirths In California

The numbers of diagnoses and fetal deaths have surged over five years.

<table>
<thead>
<tr>
<th>Year</th>
<th>Diagnosis</th>
<th>Stillbirths</th>
</tr>
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<tbody>
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<td>51</td>
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<td>202</td>
<td>12</td>
</tr>
<tr>
<td>2017</td>
<td>248</td>
<td>30</td>
</tr>
</tbody>
</table>

Source: California Department of Public Health
Sexually transmitted diseases dramatically increase in California
Does social media play a role in this dramatic increase in STIs?

• “…Dr. James Watt, chief of the division of communicable disease control for the [California] Department of Health, said social media played a significant role by helping people find anonymous sex partners.

• ‘It makes it easier for people to meet people they don’t already know to have sex,’ Watt said. ‘The internet allows for a broadening of sexual networks, and the broader that gets the more opportunity you have for sexually transmitted diseases to spread…The levels we are seeing now are higher than they’ve been since 1990…We’ve been seeing increases for all three diseases for the last five or six years. It’s concerning because that slope, that uptick, doesn’t seem to be coming down. In fact, it seems to be getting steeper.’
Women’s fertility regulation strategies may have unintended consequences

- These may not be readily apparent at the time of decision-making
- “At different points in their lives, women may rely on opposite fertility regulation strategies...young women need information on the possibility of future infertility at a later age”10

- For example, the use of abortion as a fertility regulation strategy may be a risk marker for future infertility10, or difficulty carrying to term
  - Abortion is known to be associated with increased risk for future preterm birth11-14
  - Women may also contracept beyond their natural fertility15-18

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Health consequences of the sexual revolution: changes in women’s fertility strategies

• Much attention has been directed to the effects of various contraceptive methods on women’s health. For example,
  • Women using hormonal contraception maybe at increased risk for blood clots (in the legs and/or lungs), stroke, and heart attack (especially in smokers, older women, women with cardiovascular disease and women with complicated migraine), and breast cancer
  • Medroxyprogesterone acetate (DepoProvera) has a black box warning regarding risk of decreased bone density
Health consequences of the sexual revolution: changes in women’s fertility strategies

• However, little to no attention has been paid to the effects of hormonal contraception on oocytes, and hence a woman’s possible future offspring
  • As an example, one hypothesis correlates the prevalence of oral contraceptive pill use with that of autism\textsuperscript{12}

\textsuperscript{12}Strifert K. The link between oral contraceptive use and prevalence in autism spectrum disorder. \textit{Medical Hypotheses} 83 (2014) 718–725.
Changes in women’s fertility strategies have consequences for women’s health

• As noted above, several studies suggest an association between abortion and risk for subsequent preterm birth.

• The Institute of Medicine (2006) noted that “The numerous efforts to prevent preterm birth have had little success…These risk factors are detailed in Table B-5.”
### TABLE B-5 Immutable Medical Risk Factors Associated with Preterm Birth

- Previous low birth weight or preterm delivery
- Multiple 2nd trimester spontaneous abortion
- Prior first trimester induced abortion
- Familial and intergenerational factors
- History of infertility
- Nulliparity
- Placental abnormalities
- Cervical and uterine anomalies
- Gestational bleeding
- Intrauterine growth restriction
- In utero diethylstilbestrol exposure
- Multiple gestations
- Infant sex
- Short stature
- Low prepregnancy weight/low body mass index
- Urogenital infections
- Preeclampsia
The tale of this ill- advised but ultimately, er, successful liaison is recounted in “Madame Claude: Her Secret World of Pleasure, Privilege, & Power,” by William Stadsem (St. Martin’s Press).

Madame Claude, born Fernado Gruget on July 6, 1923, in Angers, France, was one of the world’s most successful madams.

Starting in 1957, she ran an exclusive, high-class prostitution ring that offered a very specific type of woman — tall, supermodel-gorgeous, classy and upscale (or at least trained to appear so) — to the world’s richest and most powerful men.

The young women who worked for her were known as Claude girls, which became a well-known and powerful brand. She scouted them carefully, paid for plastic surgery if needed, and ultimately hoped to marry them off to aristocracy.

“A date with a ‘Claude girl’ was one of those pinnacle Paris experiences,” writes Stadsem, “like staying at the Ritz or dinner at Maxim’s or wearing a Lanvin suit . . . an apotheosis of luxury that the French do better than any other nationality.”

According to Stadsem, Madame Claude’s client list included the world’s most successful men of the time: Kennedy, Frank Sinatra, Pablo Picasso, Marc Chagall, Sammy Davis Jr., former Vice President Nelson Rockefeller, three generations of Gettys, the Shah of Iran, Marlon Brando, Darryl Zanuck, Groucho Marx. If you were rich, famous and male in the 20th century, chances are Madame Claude knew what you liked in bed, and provided exactly that.
“Le plus ca change…”

• Madame Claude catered to the world’s richest and most powerful men
“OH MY GOD, THIS IS SO F---ED UP”: INSIDE SILICON VALLEY’S SECRETIVE, ORGIASTIC DARK SIDE

Some of the most powerful men in Silicon Valley are regulars at exclusive, drug fueled, sex-laced parties—gatherings they describe not as scandalous, or even secret, but as a bold, unconventional lifestyle choice. Yet, while the guys get laid, the women get screwed. In an adaptation from her new book, *Brotopia*, Emily Chang exposes the tired and toxic dynamic at play.

BY EMILY CHANG
JANUARY 2, 2018 5:00 AM
“‘It’s awesome,’” says Founder X. At work, he explains, ‘you’re well funded. You have relative traction.’ Outside work, ‘why do I have to compromise? Why do I have to get married? Why do I have to be exclusive? If you’ve got a couple girls interested in you, you can set the terms and say, ‘This is what I want.’ You can say, ‘I’m happy to date you, but I’m not exclusive.’ These are becoming table stakes for guys who couldn’t get a girl in high school.’
“Another female entrepreneur described the unfair power dynamic that’s created. ‘There is this undercurrent of a feeling like you’re prostituting yourself in order to get ahead because, let’s be real, if you’re dating someone powerful, it can open doors for you. And that’s what women who make the calculation to play the game want, but they don’t know all the risks associated with it,’ she said”.

(What does this sound like?)
What do the behaviors described by Steinem and Chang, and the abuse described by women in the #MeToo moment, have in common?

• Might they have occurred as a result of the sexual revolution?
• Moreover, were they made possible by contraception and abortion?
• What needs to change?
Conclusion

• Human behavior has not changed, but it has been facilitated, sometimes at its worst, by the sexual revolution.

• It seems reasonable to ask if the sexual revolution has been an aggregate good for both women and men.