EMBARGOED UNTIL 12:01 A.M. EST
WEDNESDAY, FEBRUARY 11, 2026

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The Menopause Society™
Leading the Conversation

Nonablative Radiofrequency May Improve Sexual Function in Postmenopausal Women

New study suggests effectiveness of nonablative capacitive-resistive monopolar radiofrequency on sexual function and vaginal health

CLEVELAND, Ohio (Feb 11, 2026)—Hormone declines during menopause can cause genitourinary syndrome of menopause (GSM), a cluster of vulvovaginal and urinary symptoms that can significantly impair a woman's quality of life. Local estrogen therapy is effective in relieving genitourinary symptoms, but a new study suggests nonablative capacitive-resistive monopolar radiofrequency (CRMRF) may also be effective in restoring vaginal and sexual health. Study results are published online today in *Menopause*, the journal of The Menopause Society.

Genitourinary syndrome of menopause is estimated to affect at least half of postmenopausal women. Common symptoms include vaginal dryness, burning, irritation, and dyspareunia—symptoms that are often associated with reduced sexual desire, arousal, orgasm, and sexual satisfaction. Conventional treatments include moisturizers and lubricants, but these only provide temporary symptom relief and do not reverse the physical changes of GSM. Because some women are unable or unwilling to use hormone therapy, there has been growing interest in such regenerative therapies as lasers and radiofrequency.

Their thermal effect is achieved through the oscillation of intracellular ions and molecules that increases the tissue temperature. The resulting heat activates physiologic responses and stimulation to improve tissue elasticity, hydration, and structural remodeling. Studies have shown that temperatures ranging between 40°C and 45°C are sufficient to induce cellular biomodulation without causing thermal damage.

There is increasing evidence that different types of radiofrequencies can improve vaginal laxity, urinary incontinence, sexual function, vaginal dryness, and dyspareunia, achieving results that are comparable to those of estrogen therapy and superior to those of moisturizers. However, evidence on intracavitary radiofrequency applications in menopause is limited, and none of the previous studies included a sham-controlled group.

In this new small-scale study, researchers addressed this gap by incorporating a sham-controlled group. Given the significant effect of GSM on sexual function and well-being for postmenopausal women and the limitations of conventional nonhormone therapies, exploring new therapeutic alternatives is necessary. The new study showed that CRMRF achieved significant improvements in overall sexual function, especially in the areas of lubrication, orgasm, and pain. The researchers concluded that the treatment is a safe, well-tolerated, and effective nonhormone intervention for improving vaginal health and sexual function in postmenopausal women with GSM.

Study results are published in the article "Efficacy of nonablative radiofrequency on sexual function in postmenopausal women: a randomized clinical trial."

“This small study provides preliminary evidence on the effectiveness of nonablative radiofrequency on vaginal health and sexual function in postmenopausal women. Additional studies in larger and more diverse cohorts with multidimensional outcome assessments and longer-term follow-up are needed to confirm clinical applicability,” says Dr. Stephanie Faubion, medical director for The Menopause Society.

For more information about menopause and healthy aging, visit www.menopause.org.

The Menopause Society is dedicated to empowering healthcare professionals and providing them with the tools and resources to improve the health of women during the menopause transition and beyond. As the leading authority on menopause since 1989, the nonprofit, multidisciplinary organization serves as the independent, evidence-based resource for healthcare professionals, researchers, the media, and the public and leads the conversation about improving women’s health and healthcare experiences. To learn more, visit menopause.org.