

## Sexual Health Issues in Women with Cancer

Women being treated for cancer may experience changes that affect their sexual life during, and sometimes after, treatment. While you may not have the energy or interest in sexual activity that you did before treatment, feeling close to and being intimate with your spouse or partner is probably still important.

Your doctor or nurse may talk with you about how cancer treatment might affect your sexual life, or you may need to be proactive and ask questions such as: *What sexual changes or problems are common among women receiving this type of treatment? What methods of birth control or contraception are recommended during treatment?*

Other questions to consider asking are listed at the end of this page.

Whether or not your sexual health will be affected by treatment depends on factors such as:

- the type of cancer
- the type of treatment(s)
- the amount (dose) of treatment
- the length (duration) of treatment
- your age at time of treatment
- the amount of time that has passed since treatment
- other personal health factors

## Cancer Treatments May Cause Sexual Problems in Women

Some problems that affect a woman's sexual health during treatment are temporary and improve once treatment has ended. Other side effects may be long term or may start after treatment. Your doctor will talk with you about side effects you may have based on your treatment(s):

- Chemotherapy can lower estrogen levels and cause primary ovarian insufficiency. This means the ovaries aren't producing hormones and releasing eggs. Symptoms may include hot flashes, irregular or no periods, and vaginal dryness, which can make sexual intercourse difficult or painful. Chemotherapy can also affect vaginal tissue, which may cause sores.
- Hormone therapy (also called endocrine therapy) may cause low estrogen levels which can lead to symptoms such as hot flashes, irregular or no periods, and vaginal dryness. Learn about less common but serious side effects of Hormone Therapy for Breast Cancer.

- Radiation therapy to the pelvis (such as to the bladder, cervix, colon, ovaries, rectum, uterus, or vagina) can cause low estrogen levels and, therefore, vaginal dryness. Vaginal stenosis (less elastic, narrow, shorter vagina), vaginal atrophy (weak vaginal muscles and thin vaginal wall), and vaginal itching, burning, and inflammation can also cause pain and discomfort during sex.
- Surgery for gynecologic cancers may affect your sexual life. Treatment for other cancers can also bring about physical changes that may affect the way you view your body. Your health care team will talk with you about what to expect and teach you how to adjust after surgery, such as after a mastectomy or an ostomy, for example.
- Medicines such as opioids and some drugs used to treat depression may lower your interest in sex.

## Ways to Manage Sexual Health Issues

People on your health care team have helped others to cope during this difficult time and can offer valuable suggestions. You may also want to talk with a sexual health expert to get answers to any questions or concerns.

Most women can be sexually active during treatment, but you'll want to confirm this with your doctor. For example, there may be times during treatment when you are at increased risk of infection or bleeding and may be advised to abstain from sexual intercourse.

Your health care team can help you:

- **Learn about medicine and exercises to make sex more comfortable, including:**
  - vaginal gels or creams to stop a dry, itchy, or burning feeling
  - vaginal lubricants or moisturizers
  - vaginal estrogen cream that may be appropriate for some types of cancer
  - a dilator to help prevent or reverse scarring, if radiation therapy or graft-versus-host disease has affected your vagina
  - exercises for pelvic muscles to lower pain, improve bladder retention, improve bowel function, and increase the flow of blood to the area, which can improve your sexual health
- **Manage related side effects:** Talk with your doctor or nurse about problems such as pain, fatigue, hair loss, loss of interest in activities, sadness, or trouble sleeping, that may affect your sex life. Speaking up about side effects can help you get the treatment and support you need to feel better.
- **Learn about condoms and/or contraceptives:** Condoms may be advised to prevent your partner's exposure to some types of chemotherapy that may remain in vaginal secretions. If you are of childbearing age, contraceptives may be advised to prevent pregnancy while you are receiving treatment and for a period of time following treatment. For more information, see Fertility Issues in Girls and Women.

- **Get support and counseling:** During this time, you can gain strength and support by sharing your concerns with people you are close to. You may also benefit from participating in a professionally moderated or led support group. Your nurse or social worker can recommend support groups and counselors in your area.

Learn more about organizations that provide support by visiting our database of national organizations that offer cancer-related support services and choosing from a list of services.

## Talking with Your Health Care Team about Sexual Health Issues

As you think about the changes that treatment has brought into your life, make a list of questions to discuss with your doctor, nurse, or social worker. Consider adding these to your list:

- What sexual problems are common among women receiving this treatment?
- What sexual problems might I have during treatment?
- When might these changes occur?
- How long might these problems last? Will any of these problems be permanent?
- How can these problems be prevented, treated, or managed?
- What specialist(s) would you suggest that I talk with to learn more?
- Are there support groups in this area that you recommend?
- What method(s) of birth control are advised?
- What precautions do I need to take during treatment? For example, should my partner use a condom? Are there times when I should avoid sexual activity?

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**Source:** National Cancer Institute