

Sexual function concerns not always reflected in prostate cancer treatment choices

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Preserving sexual function was important to many men facing treatment for prostate cancer, according to a recent study by University of North Carolina Lineberger Comprehensive Cancer Center researchers. However, this preference was not strongly reflected in the treatment choices of men with low-risk prostate cancer.

In a survey of nearly 1,200 men in North Carolina who have prostate <u>cancer</u>, more than half, or 52.6 percent, indicated that preserving <u>sexual function</u> was "very important" to them. For men with low-risk prostate cancer, researchers reported in the *Journal of the National Cancer Institute* that preference for preserving sexual function was not strongly linked to the choice of a strategy that researchers say is the best option for preserving sexual function.

"Unfortunately, we found that men who had low-risk prostate cancer and wanted to preserve sexual function did not necessarily choose active surveillance," said UNC Lineberger's Ronald C. Chen, an associate professor in the UNC School of Medicine Department of Radiation Oncology. "This indicates that many patients may not have known about active surveillance as an option."

Men with low-risk prostate cancer have multiple treatment options, including surgery, multiple forms of radiation treatment and active surveillance. Treatment options can have side effect risks, including sexual dysfunction. Chen said that active surveillance, which is strategy in which men undergo regular testing rather than immediate treatment, is



widely recognized as the best strategy to preserve sexual function for men with low-risk prostate cancer.

Researchers found in their survey that of the 568 men identified as having with low-risk prostate cancer, 43.4 percent received active surveillance. However, they didn't find that those men with low-risk prostate cancer who had a strong preference for preserving sexual function chose active surveillance more frequently than those who cared less about preserving sexual function.

Chen said the results demonstrate that there is a disconnect between what patients prefer, and the treatment they are getting.

"The takeaway for prostate cancer patients is that they should always ask two important questions," Chen said. "One, how aggressive is my cancer? Two, what are my options? After understanding this, it is important they communicate with their doctor what their priorities are in making a decision among the available options."

He said it's also important for physicians to counsel patients to reflect their preferences.

"Active surveillance is widely recognized to be an excellent option for patients diagnosed with low-risk prostate cancer, because it is the best option to preserve the patient's quality of life including sexual function," he said. "Some patients with prostate cancer may initially want aggressive treatment, and it is important for the physician (urologist and radiation oncologist) to fully counsel patients about the slow-growing nature of low-risk prostate cancer and that active surveillance is a safe option."

Provided by UNC Lineberger Comprehensive Cancer Center



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