# Sexual health often overlooked in cancer survivorship care, especially for female patients 

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A new study points to a need for oncologists to ask their patients about sexual health after chemotherapy, radiation and other cancer treatments. In a survey of nearly 400 cancer survivors, $87 \%$ said they experienced sexual side effects, but most also said their oncologist had not formally asked about them. Female patients were especially unlikely to be asked about sexual dysfunction. Findings will be presented today at the American Society for Radiation Oncology (ASTRO) Annual Meeting.
"Sexual dysfunction is an unfortunately common side effect of cancer treatment, and there appears to be a large gender disparity in how physicians discuss sexual health with their patients," said lead author James Taylor, MD, MPH, chief resident in radiation oncology at the Sidney Kimmel Cancer Center at Thomas Jefferson University in Philadelphia. "Our results show that we are asking men about sexual dysfunction caused by cancer treatment, but we are not asking women as frequently. We should be asking everyone, to determine how we can help."

Survivorship care is a growing focus in oncology as outcomes improve and patients live longer after treatment. Side effects that impact sexual function or desire are closely linked with quality of life. Potential issues for cancer survivors include physical complications such as erectile dysfunction with prostate cancer treatment or vaginal dryness with gynecological cancer treatment. Other issues include emotional and
mental challenges such as body dysmorphia after mastectomy or decreased sexual desire with hormone therapy.

For this study, more than 400 adults completed an electronic survey about their experiences with sexual side effects after cancer treatment (391 responses were eligible for analysis). Most respondents were female ( $81 \%$ ), and the most common cancer types were breast ( $67 \%$ ), prostate ( $16 \%$ ) and endometrial ( $6 \%$ ) cancers. Treatments included chemotherapy ( $78 \%$ ), radiation therapy ( $54 \%$ ) and hormone therapy (47\%).

Nearly nine in 10 respondents ( $87 \%$ ) reported some change after treatment that negatively impacted their sexual health and quality of life. The most common side effects included painful intercourse ( $73 \%$ ), body image distortion (54\%) and inability to achieve orgasm (42\%). Fewer than half of respondents (44\%) said they were counseled preemptively that their sexual health could be affected by their cancer treatment.

Female cancer survivors were less likely to have their sexual side effects addressed than male survivors were. Male respondents were twice as likely to say they were asked and counseled about potential toxicity (53\% vs. $22 \%$, p

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