

Sexual wellbeing after breast or pelvic cancer treatment

A guide for women

A photograph showing a woman in a white lab coat, likely a healthcare professional, talking to a woman in a white shirt, likely a patient, in a clinical setting. The image is overlaid with a purple tint.

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About this guide

If you have completed treatment for any of the following cancers, this guide is for you. It deals with questions you may have about your sexuality or your sexual health.

- Breast cancer
- Gynaecological cancers
(cancer of the womb, ovaries or cervix)
- Bowel, rectal and anal cancer
- Bladder cancer

Having cancer may affect your relationships with your family, friends and colleagues. You and your family may need time to adjust. People deal with cancer in different ways. Some may be overly positive or negative. Others may play down fears, worry or keep a distance. It may be helpful to discuss your feelings and concerns with your partner, friend or family member and ask for their support.

Your sexuality is part of who you are. After a cancer diagnosis and treatment, you may feel good about who you are and how you express your sexuality with others, or you may feel different. Remember that sex includes both emotional and physical wellbeing. It starts with desire and arousal before there is any physical contact. Sexuality is about more than intercourse.

Try to talk openly with your healthcare team about your sexual wellbeing especially if your cancer treatment has affected it. Your team are aware that you may have problems. They can look into your symptoms and answer your questions. Sometimes just talking to them may help.

What you need to know

While cancer treatment may affect your sexuality, your sex life doesn't have to end. You are your strongest resource.

Not everything in this guide will apply to you. The effects of treatment depend on which cancer and treatment you had. You don't need to read this guide from cover to cover – just read the parts that you think will help you best. We explain some specialist terms at the back of the guide.

This guide was developed as part of the National Cancer Control Survivorship Programme.

Understanding your pelvis

The female pelvis is the lower part of the trunk of your body (below your belly). It contains the pelvic bones, bladder, rectum, and reproductive organs (see Figure 1 and Figure 2).

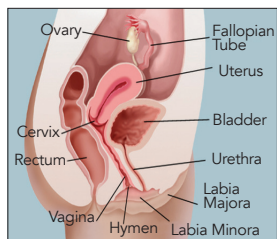


Figure 1
The female pelvis¹

¹ Courtesy of WebMD

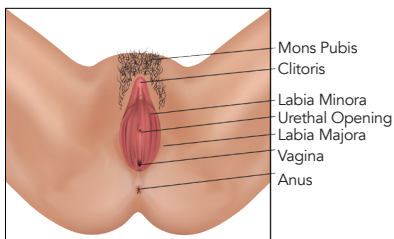


Figure 2
The female vulva²

² Courtesy of Shutterstock

- Your vagina is an elastic muscle with a soft flexible lining that provides lubrication (moistness) and sensation during sex.
- The vulva is also known as the outer part of the female genitals. It includes the opening of the vagina, the urethra, the labia majora (outer lips), the labia minora (inner lips), and the clitoris (the main sexual pleasure organ for women).
- The cervix (neck of the womb) connects the vagina and the womb (uterus).
- The ovaries are small glands located on either side of the womb. They produce eggs (ova) and hormones.
- The fallopian tubes connect the ovaries to the womb.
- The womb (uterus) is where babies are carried. It is a hollow, pear-shaped organ.

- The urethra is the tube through which urine (water) passes from the bladder to the outside of the body.
- The bladder is a sac (bag) that stores urine.
- The colon and rectum form the large intestine (bowels).
- The anus is the opening at the end of your bowel. It is the muscle which gives you control when you pass a bowel motion (poo).

Effect of cancer treatment on your sexual wellbeing

You may experience emotional and physical changes during and after cancer treatment which may cause sexual problems. Treatments may affect your:

Body image	How you feel about your body.
Mood	How you feel emotionally at a particular time.
Energy levels	Your energy levels may change. A common side effect of treatment is fatigue. This is an ongoing feeling of physical, emotional and mental tiredness, or exhaustion. You may experience fatigue for months or even years after finishing your treatment.
Sense of wellbeing	State of being comfortable, healthy and happy.
Sexual desire	A desire to engage in sexual activity.
Orgasm	The climax of sexual excitement.

Other issues which may affect sexual wellbeing

Problems with sexual function are not only caused by cancer and its treatment. Lifestyle, psychological and physical reasons may also affect your sexual wellbeing.

Lifestyle	Psychological	Physical
<ul style="list-style-type: none">• Being an unhealthy weight (underweight or overweight)• Inactivity• Smoking• Using recreational drugs• Drinking too much alcohol	<ul style="list-style-type: none">• Emotional or mental distress• Feeling stressed• Feeling tired• Feeling unhappy in a relationship	<ul style="list-style-type: none">• Inability to get sexually aroused or stay aroused• Low or no lubrication in your vagina• Some medications may affect your mood or sexual desire• Menopause• Growing older• Having diabetes

Types of cancer treatments

There are many types of treatment for cancer. Any of these treatments may affect sexuality depending on the type of cancer. We explain these on the following pages.

Treatment type:	Table no:	Page no:
Surgery	Table 1	9-16
Radiotherapy	Table 2	18-20
Hormonal therapy	Table 3	21-22
Chemotherapy	Table 4	23

How breast or pelvic surgery affects sexual wellbeing

Surgery involves removing a tumour or growth from your body.

Table 1 Surgery

Type of surgery	Effect on sexual wellbeing
Breast cancer surgery <ul style="list-style-type: none">• Mastectomy (removal of one or both breasts)• Wide Local Excision (removal of part of a breast)• Breast reconstruction (creating a breast shape using surgery)	These surgeries may: <ul style="list-style-type: none">• change your body image and affect your sense of wellbeing• cause short-term or long-term pain or discomfort, or a change of sensation• reduce sexual pleasure if your nipple was removed. Options: <p>Breast reconstruction may help you to cope with changes to your body image although it does not replace your own breast tissue.</p>

Type of surgery	Effect on sexual wellbeing
	<p>After breast reconstruction you may have different sensations or even feel numb in the reconstructed breast. This may take some time to get used to.</p>
<p>Bowel cancer surgery</p> <ul style="list-style-type: none"> • Abdomino-perineal Resection (surgery for rectal or anal cancer) • Low Anterior Resection (removal of part of your rectum) 	<p>This type of surgery involves removing the lower part of your rectum (bowel). The surgery may damage nearby nerves which may affect sensation in the genital area.</p> <p>As the rectum is close to your sexual organs, you may feel discomfort during intercourse or penetration.</p>

Type of surgery	Effect on sexual wellbeing
	<p>Surgery to the lower bowel often means you may have a stoma bag (called a colostomy or ileostomy) on your abdomen (tummy) to collect your bowel motion (poo). This may make you feel differently about your body. You may feel embarrassed and avoid sexual activity.</p> <p>Depending on your surgery and diagnosis your stoma may be reversed later. Ask your healthcare team about this.</p>

Type of surgery	Effect on sexual wellbeing
<p>Bladder cancer surgery</p> <ul style="list-style-type: none"> • Radical Cystectomy (removal of the bladder, nearby lymph nodes and part of the urethra) 	<p>This depends on how your urine is brought outside your body and if you have a stoma (an opening on the surface of the tummy to collect the urine). This may affect your body image.</p> <p>The effects on sexual function include:</p> <ul style="list-style-type: none"> • decreased orgasm • decreased lubrication (moistness) • lack of sexual desire • painful intercourse.

Type of surgery	Effect on sexual wellbeing
<p>Gynaecological cancer surgery</p> <ul style="list-style-type: none"> • Total Hysterectomy (removal of the womb and cervix). This surgery treats endometrial and cervical cancer • Radical Hysterectomy (removal of the womb, cervix and part of the vagina). This surgery treats cervical cancer 	<p>Effect of hysterectomy on sexual wellbeing</p> <p>Following any type of hysterectomy, your periods will stop. You may not be fertile and cannot become pregnant. Some women find this very hard to deal with emotionally.</p> <p>After a hysterectomy, some women may feel less feminine as their view of their body has changed.</p> <p>Some younger women may feel that the loss of fertility affects their sexuality.</p> <p>Having a hysterectomy does not change your ability to experience sexual pleasure or have an orgasm.</p>

Type of surgery	Effect on sexual wellbeing
<ul style="list-style-type: none"> • Bilateral Salpingo-oophorectomy (removal of both fallopian tubes and both ovaries) • Pelvic Lymph Node Dissection • Bilateral Pelvic Lymph Node Dissection (removal of lymph nodes in the pelvis). This may be done as part of the surgery to treat cancer of the cervix or womb. 	<p>Effect of oophorectomy on sexual wellbeing</p> <p>As your ovaries are no longer producing hormones, you will experience symptoms of the menopause, including:</p> <ul style="list-style-type: none"> • dry vagina • painful intercourse • hot flushes • fatigue • difficulty in sleeping • emotional irritability. <p>All of these symptoms may affect your sexual desire, sense of wellbeing and energy.</p>

Type of surgery	Effect on sexual wellbeing
	<p>Effect of lymph node removal on sexual wellbeing</p> <p>This may result in swelling of the legs or pain and swelling in the vulva (outer genital area) causing discomfort during sexual activity.</p>
<p>Vulvectomy or vulvar excision</p> <ul style="list-style-type: none"> • Removal of part of the vulva or the entire vulva, nearby lymph nodes and in some cases the clitoris. This surgery is for cancer of the vulva. 	<p>As this surgery can affect the nerves in the genital area, you may experience:</p> <ul style="list-style-type: none"> • permanent or temporary numbness of the vulva • decreased sensitivity in the area depending on how much tissue was removed • a feeling of tightness that may interfere with penetration.

Type of surgery	Effect on sexual wellbeing
	<p>If lymph nodes are removed, it may result in:</p> <ul style="list-style-type: none"> • swelling of the lower legs, and • pain and swelling in the vulva causing discomfort. <p>If the clitoris is removed, you will:</p> <ul style="list-style-type: none"> • not be able to have a clitoral orgasm. <p>This may make some partners anxious and fearful. It could also change your image of your body.</p> <p>You may also experience lack of sex drive, lack of sensation in the outer lips of the vagina, dryness, shortening of the vagina and pain during intercourse.</p>

How pelvic radiotherapy affects sexual wellbeing

Radiotherapy affects people in different ways. It's difficult to predict exactly how you will react to it. The side effects you may have will depend on the:

- type of cancer
- dose of radiotherapy
- type of radiotherapy – internal radiotherapy (brachytherapy) or external beam radiotherapy.

Table 2 Radiotherapy

Type of radiotherapy	Effect on sexual wellbeing
<p>Internal radiotherapy (brachytherapy) or external radiotherapy</p> <p>(Treatment for bladder, cervical, womb, vaginal, vulval, rectal and anal cancers)</p>	<p>Radiotherapy may cause side effects but many of these can be treated. You may not suffer all the side effects mentioned below. After treatment some women may experience changes in sexual wellbeing such as:</p> <ul style="list-style-type: none">• Menopause: if you have not gone through the menopause, radiotherapy may bring this on. Menopause can cause hot flushes, loss of sexual desire and vaginal dryness

Type of radiotherapy	Effect on sexual wellbeing
	<ul style="list-style-type: none"><li data-bbox="399 230 912 547">• Fertility: Radiotherapy to the pelvis may affect your sexual organs and how they function. This can have a permanent effect on your ability to have children.<li data-bbox="399 569 923 1271">• Dryness and narrowing of the vagina: This may cause discomfort during intercourse or during vaginal examinations. Some women may bleed after intercourse. To reduce these symptoms, your healthcare team will suggest the use of lubricants, moisturisers, oestrogen therapy, vaginal dilators and resuming sexual intercourse.

Type of radiotherapy	Effect on sexual wellbeing
	<ul style="list-style-type: none"><li data-bbox="399 231 943 656">• In some women, the bowel and bladder may be affected after treatment. This may result in you going to the toilet more often, having looser bowel movements and feeling that you need to pass urine more often.<li data-bbox="399 695 928 899">• Fatigue may continue after treatment and may affect your physical, emotional and sexual wellbeing.<li data-bbox="399 939 917 1364">• If your lymph nodes are treated, you may develop lymphoedema. This can cause swelling in the legs which may affect your body image. Talk to your healthcare team about ways to manage this.

How hormone therapy affects your sexual wellbeing

Hormone therapy is a drug treatment used to reduce the risk of cancer coming back.

Table 3 Hormone Therapy

Type of hormone therapy	Effect on sexual wellbeing
<p>Hormone therapies include:</p> <ul style="list-style-type: none">• Tamoxifen• Fulvestrant• Anastrozole (Arimidex)• Letrozole (Femara)	<p>Hormone therapy is used to treat breast cancer. It may reduce your interest in sex due to hot flashes, sleeplessness, bloating, mood changes and other menopausal symptoms. It may also cause vaginal dryness, which can make intercourse uncomfortable.</p>

Type of hormone therapy	Effect on sexual wellbeing
	<p>Some women undergoing hormone therapy may experience vaginal bleeding – if this happens, tell your healthcare team immediately.</p>

How chemotherapy affects your sexual wellbeing

The word 'chemotherapy' means medicine used to help treat cancer.

Table 4 Chemotherapy

Chemotherapy	Effect on sexual wellbeing
Breast or pelvic cancer (breast, bowel, rectal, anal and gynaecological cancer)	<p>Chemotherapy can have a wide variety of side effects on your overall wellbeing. It can affect sexual desire and sexual function. Ask your healthcare team to explain the specific side effects of your treatment.</p> <p>If you have not gone through the menopause, chemotherapy may bring it on. Menopause can cause hot flushes, loss of sexual desire and vaginal dryness.</p>

Treatments that may help improve sexual wellbeing

There are several options listed below which may help you. You may have to try a number of options to see what suits you.

Table 5 Treatments

Oral tablets

- Hormone replacement therapy (HRT) replaces the hormones that the body stops producing after the menopause. This may ease or reduce many of the symptoms of the menopause such as hot flushes and night sweats.
- HRT has been shown to improve sensitivity in the clitoris and vagina, vaginal lubrication (moistness) and sexual desire.

- HRT is not recommended after some cancers. Talk to your healthcare team to see if it is suitable for you.

Lubricants

(can be water, silicone or oil based. Be careful when you use oil-based lubricants as they can damage condoms)

- Lubricants reduce painful friction (rubbing) in the vaginal area.
- They improve sexual arousal by stimulating the flow of blood to the vulva.
- They lubricate the clitoris. This may create more sexual pleasure and make it easier to have an orgasm.
- They keep the skin of the vagina soft and the walls elastic.

Dilators

- A vaginal dilator is a smooth plastic or rubber tube (a bit like a large tampon). The dilator works by gently and slowly stretching the scar tissue that has formed in the vagina. This helps to make both intercourse and physical examinations by your doctor more comfortable.
- Dilator kits contain a range of different sized dilators so you can find the right size for you.

Vibrators

- You can use vibrators in a similar way to the way you use dilators.
- Talk to your healthcare team if you have had pelvic cancer treatment and want to use a vibrator.

Fantasy

- Fantasies can increase your sexual excitement.
- You can create fantasies using your imagination or a positive memory. Fantasies can also be triggered by erotic literature, films, physical objects or sexual attraction to another person.

Frequently asked questions

What can I do to help myself?

Sex begins with desire and arousal before there is any physical contact. It progresses through sensual touching, kissing, sexual touching and foreplay.

Table 6 What can I do to help myself?

1. Be kind and patient with yourself.
2. Talk to your partner about how you are feeling as this may help. Let them know why you do not want sex but reassure them that you love them. Most partners will be happy to do things at your pace.
3. Let your partner show you affection by talking, holding your hand, hugging, kissing, touching or massaging you.

4. Try different ways of getting aroused such as showering together or going away for a weekend. Do whatever makes you feel relaxed and good about yourself.
5. Be intimate at whatever time of day is best for you (for example, in the morning when you feel refreshed or the evening when you may be more relaxed). Have shorter lovemaking sessions.
6. If you like to masturbate, do so. This may reassure you that you can still enjoy sex. Or, you may want to stimulate your partner and help him or her reach orgasm, even if you do not want this yourself.
7. Change position during sex to work out which position is the most comfortable for you. There is no magic position that's right for everyone. You and your partner need to find the one that's best for you. Try pillows as supports if you think they might help. See the funny side to lighten the mood.

8. Be physically active for at least 30 minutes a day, for example, try walking. This may help to stimulate sexual desire by increasing your energy levels and lifting your mood.
9. Ask your healthcare team about medications or treatments that may help.

How do I talk to my partner about my sexual wellbeing?

Talking to each other is important in any relationship if you want to have a healthy sex life. In particular, sharing concerns about cancer may help to reduce worries and boost your emotional intimacy and trust. You may not even be aware that you are not taking an interest in sex or being as intimate as you used to be. This may be confusing for your partner and may make them feel uncertain about how to react.

You may worry that others will avoid or reject you when they see how your body and your responses may have changed. You may not be able to imagine yourself in a sexual situation again. But you can help yourself by talking to your partner or healthcare team.

Create physical and emotional intimacy for yourself and your partner:

- Create a safe time and place to be intimate
- Focus on the positive
- Share your fears of sexual rejection
- Talk about your fears about survival and the cancer coming back
- Share your fears about breaking up
- Be a good listener.

What can I do if I am not in a relationship but would like to be?

- Do not let cancer define who you are. You do not have to bring it up until you are ready and are happy in the relationship. Ease back in to the dating world.
- Find a friend – a partner who cares about you as a friend.
- Be honest – say clearly what was done, how you are doing, what you feel.
- It may help to practise what you want to say before you speak.

When can I start having sex again?

This depends on your particular cancer treatment. Ask your healthcare team for advice.

You may decide to wait for a while after treatment before having sex. However, research has shown that staying sexually active, especially after cancer treatment, may help you avoid sexual problems later. If you do have sex, use safe sexual practices and use contraception if you need to.

Talk to your healthcare team and partner. Your physical and emotional concerns are important. It can help to write down your questions and concerns about your sexual health before your hospital appointments.

After cancer treatment, what sexual symptoms should I tell my healthcare team about?

Healthcare teams with specialist training may help you to cope with specific sexual problems. It is a good idea to get advice and support, rather than 'put up with it'. Talk to your healthcare team – either with your partner or separately.

An important part of cancer care is relieving the physical side effects of treatment that may affect having and enjoying sex. Your healthcare team can tell you about options to help you manage or discuss any other worries you may have that are not addressed in this guide.

What sexual problems might I experience as a result of my cancer treatment?

Cancer and its treatment may affect you and your sexual response. The most common problems are:

- a lack of sexual desire or no interest in sex
- inability to become aroused – this often results in vaginal dryness
- lack of orgasm – no sexual climax
- painful intercourse – this can be caused by a number of problems.

Should I do pelvic floor exercises?

Many women find pelvic floor exercises helpful as they ease stress and strengthen the pelvic muscles. This can help sexual function. Ask your healthcare team for advice on how to do these exercises.

Healthy living tips after cancer treatment

Quit smoking



Ireland now has more quitters than smokers. Go to www.quit.ie or call **1800 201 203** for support.

Alcohol; Less is best



Alcohol causes 7 types of cancers. Go to www.askaboutalcohol.ie to learn more.

Stay a healthy weight



Being overweight is linked to 11 cancers. **Keep a check on your weight.**

Activity; More is best



Physical activity protects against cancer. **Be active for at least 30 minutes every day, and sit less.**

Be smart in the sun to protect against skin cancer



Slap on a hat, slip on sunglasses, seek shade, slop on **suncream of at least factor 30.**

Food is to be enjoyed, have a healthy diet



- ▶ Eat plenty of **vegetables and fruits**
- ▶ Check food labels and **keep salt below 6g per day**
- ▶ **Limit high-calorie foods** (foods high in sugar or fat), and avoid sugary drinks
- ▶ **Avoid processed meat**, limit red meat.

Useful contacts

Your nurse can help you fill this in.

Consultant:

Phone:

Nurse:

Phone:

Location:

Glossary

Anus	The opening where solid waste (poo) leaves the body.
Healthcare team	Doctors, nurses, and other health professionals from different specialties working together.
Hormone therapy and anti-oestrogen therapy	Oestrogen is one of the female sex hormones. In women with certain types of breast cancer (known as hormone-receptor-positive breast cancer), oestrogen can make the cancer grow. So reducing the amount of oestrogen or blocking its action may reduce the risk of these breast cancers coming back.

Lymphoedema	Lymphoedema is a type of swelling commonly caused by the removal of, or damage to, lymph nodes during cancer treatment. It results from a blockage in the lymphatic system which prevents lymph fluid from draining well. As the fluid builds up, it causes swelling.
Menopause	When your periods stop completely.
Orgasm	The climax of sexual excitement.
Sexual function	Broadly defined as being able to experience sexual pleasure and satisfaction.
Sexual intercourse	Penetration of the vagina by the penis which generally ends in orgasm.

Sexuality

Sexuality is an integral part of who we are, what we believe, what we feel, and how we respond to others.

Stoma

This is a small opening on the surface of the abdomen (tummy) that is sometimes created after bowel or bladder surgery to allow bowel motion (poo) and urine (water) to leave the body.



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