Female Sexual Dysfunction

Survivors sometimes experience sexual dysfunction after cancer treatment. Knowing what some of the causes are and being able to describe your symptoms to your health care team can help you manage sexual dysfunction.

Female Sexual Dysfunction: Detailed Information

This information is meant to be a general introduction to this topic. The purpose is to provide a starting point for you to become more informed about important matters that may be affecting your life as a survivor and to provide ideas about steps you can take to learn more. This information is not intended nor should it be interpreted as providing professional medical, legal and financial advice. You should consult a trained professional for more information. Please read the Suggestions (http://www.livestrong.org/Get-Help/Learn-About-Cancer/Cancer-Support-Topics/Physical-Effects-of-Cancer/Female-Sexual-Dysfunction#S#S) and Additional Resources (http://www.livestrong.org/Get-Help/Learn-About-Cancer/Cancer-Support-Topics/Physical-Effects-of-Cancer/Female-Sexual-Dysfunction#A#A) sections for questions to ask and for more resources.

Cancer and treatment can affect survivors in different ways. One area of life that might change is the ability to have or enjoy sex. These types of changes in women following cancer or treatment are sometimes referred to as female sexual dysfunction. The cause may be physical or emotional.

If this happens, there are a variety of ways to treat and manage this condition. Be sure to discuss any symptoms or concerns with your health care team as early as possible. Some women may feel uncomfortable discussing sexual concerns with a doctor or other members of the health care team. However, they can answer questions, refer you to a specialist if needed, and help you find solutions.

What are some indicators that may cause concern?

The following may be indicators that it is time to talk with your doctor about concerns related to sex after cancer treatment:

- Loss of desire for sex
- Negative thoughts and feelings during sex
- Difficulty reaching climax
- Vaginal dryness and tightness
- Pain during sex or when your genital area is touched
These types of symptoms are not generally considered to be medical emergencies. For this reason, you may wonder if you should bring up the subject to a member of your health care team. Keep in mind that all of your physical and emotional concerns are important. This is especially true if you are experiencing pain during sex or feeling that your intimate relationship has become less enjoyable.

Prepare in advance to talk with your doctor. Write down any questions and concerns you have about your sexual health. You may need to request extra time for your appointment to allow enough time for a discussion. If your doctor cannot help you, ask for a referral to another health care professional who specializes in this area.

Will all female cancer survivors experience sexual problems?

Not all survivors will experience sexual problems. In some cases, a woman may choose to wait a while after treatment before having sex. Another woman may be in a situation where she is ready to resume sexual relations right away. In any case, there may be things that can help you prepare emotionally as well as make the sexual experience more physically comfortable.

If a sexual concern is likely to occur, it may be during and after cancer treatment. Be certain to discuss any problems and symptoms with your doctor—especially if you begin to notice any changes in your ability to have or enjoy sex. Some problems, such as those caused by radiation to the pelvis, may develop months or even years after cancer treatment is done.

What causes sexual functioning concerns after cancer?

There are many different causes of sexual functioning concerns in female cancer survivors. Some are physical causes. Others may be due to changes in how you feel about yourself, your body, or other aspects of your life after cancer.

Certain types of cancer, such as those that affect sexual organs, can put survivors at risk for problems. Approximately half of survivors of breast cancer and other cancers that affect the pelvic area (such as the cervix, ovaries, uterus, bladder, colon or vagina) develop long-term sexual problems. Yet, most problems are actually caused by treatment and not the cancer itself.

Some ways treatment can affect sexual functioning include:

- **Chemotherapy** can damage the ovaries, causing hormonal changes and temporary or permanent menopause in younger women.
- **Radiation** can affect the vagina, cervix, or uterus.
- **Surgery or radiation therapy** can affect cancers in the pelvic area (bladder, colorectal, cervical, ovarian, uterine, vaginal, or vulvar cancer).
- **Side effects of medicines** used to treat pain, nausea, depression, or anxiety can affect sexual functioning.
If possible, talk with your health care team about the risks for problems with sexual functioning before you begin cancer treatment. There may be things that can be done to minimize risks. If you have already undergone treatment, talk with your doctor about finding ways to treat symptoms or concerns now.

Certain emotions can also contribute to intimacy challenges such as:

- Sad or depressed feelings
- Concerns about being less attractive
- Stress in the relationship with your partner
- Difficulty with self-esteem because of physical changes

If physical changes affect how a woman feels about herself or her body, this can also contribute to sexual problems. For example, it may be more challenging for someone who was uncomfortable with sexuality or had tension in a relationship before cancer. If you have these types of concerns, ask your doctor for a referral to a licensed counselor who has experience working with cancer survivors.

Are there successful treatments for women with sexual concerns?

There are a number of treatment options that can help women with sexual functioning concerns. It is important to discuss problems and concerns with your doctor as early as possible.

Your health care team can help you learn more about how to treat concerns and improve your ability to enjoy sex again. There are many ways to enhance and share pleasure and closeness with your partner. Even survivors who no longer have sex are able to find ways to continue to enjoy deep intimacy with their partners.

Of course, the most important factor in choosing a cancer treatment is its ability to control cancer. However, your sexual health is also important. If you are worried about sexual dysfunction after cancer treatment, talk with your health care team soon as you can about the different therapies that may be available to help you.

This document was produced in collaboration with:
Leslie R. Schover, Ph.D.
Professor of Behavioral Science, UT M. D. Anderson Cancer Center

Works Cited

American Cancer Society. “Sexuality and Cancer: For the Woman with Cancer and Her Partner.” Atlanta: American Cancer Society, 2001 (99-rev. 07/01-50M-no. 4657-HCP).


Female Sexual Dysfunction: Suggestions

The suggestions that follow are based on the information presented in the Detailed Information (http://www.livestrong.org/Get-Help/Learn-About-Cancer/Cancer-Support-Topics/Physical-Effects-of-Cancer/Female-Sexual-Dysfunction#D#D) document. They are meant to help you take what you learn and apply the information to your own needs. This information is not intended nor should it be interpreted as providing professional medical, legal and financial advice. You should consult a trained professional for more information. Please read the Additional Resources (http://www.livestrong.org/Get-Help/Learn-About-Cancer/Cancer-Support-Topics/Physical-Effects-of-Cancer/Female-Sexual-Dysfunction#A#A) section for links to more resources.

<table>
<thead>
<tr>
<th>Sexual Functioning Concerns</th>
<th>How to Find Help</th>
</tr>
</thead>
</table>
| Loss of desire for sex after cancer | • Ask a member of your health care team to check your medications for possible side effects.  
• Get medical treatment for pain that will not go away or fatigue that may be affecting your energy and desire for sex.  
• If you are in menopause, see a gynecologist or an endocrinologist for a blood test to find out if your testosterone is low. Women need some testosterone for good sexual function. However, if you had breast cancer, using replacement testosterone may not be safe for you. Discuss other options with your health care team.  
• If there are no physical causes, see a licensed counselor to find out if problems could be related to feelings of depression, anxiety or low self-esteem. |
<table>
<thead>
<tr>
<th>Sexual Functioning Concerns</th>
<th>How to Find Help</th>
</tr>
</thead>
</table>
| Difficulty feeling pleasure during sex | • Loss of interest in sex may be related to how you feel about yourself.  
• Ask for a referral to a therapist who specializes in treating cancer survivors. |
| Vaginal dryness and tightness, making sexual activity uncomfortable or painful | • Talk with a gynecologist who has expertise in menopause and problems with pain during intercourse.  
• Ask your gynecologist, for advice on muscle relaxation, local forms of estrogen, or over-the-counter lubricants. |
| Difficulty reaching orgasm | • Ask your health care team to check your medications. Antidepressants or anti-anxiety medicines may make it more difficult for you to have an orgasm.  
• Give yourself time. Try not to pressure yourself to have an orgasm. Sometimes this makes it hard for you to relax.  
• The nerves that help a woman feel pleasure around the clitoris and in the vagina are rarely damaged by cancer treatment. This means the cancer or its treatment may not physically prevent you from having an orgasm. |

Talk with your doctor about treatment options for sexual concerns. The following table cites common methods that may be recommended, as well as some pros and cons for using them:

<table>
<thead>
<tr>
<th>Treatment options for some types of sexual dysfunction</th>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pills (PDE-5 inhibitors)</td>
<td>• Increases vaginal lubrication without using estrogen hormones.</td>
<td>• Studies of PDE-5 inhibitors in women do not show a lot of change in female sexual functioning.</td>
</tr>
<tr>
<td>Treatment options for some types of sexual dysfunction</td>
<td>Pros</td>
<td>Cons</td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>------</td>
<td>------</td>
</tr>
</tbody>
</table>
| Water-based lubricants | • Water-based lubricants last longer and work better than old-style gels.  
• Can be purchased at most drugstores or over the Internet. | • The lubrication may wear off and need to be re-applied during intercourse.  
• May not be effective enough to avoid pain if there is severe vaginal dryness. | |
| Vaginal moisturizers (such as Replens) | • This gel keeps the vaginal lining moist all the time.  
• Needs to be used regularly at bedtime for up to two months to reach its full effect.  
• May replace the need for water-based lubricants. | • Can be costly and is not covered by insurance.  
• May be somewhat messy. | |
| Vaginal estrogen replacement (such as Estring, Vagifem) | • Some women prefer these products to vaginal estrogen cream.  
• The Estring releases a small dose of hormone over three months.  
• The Vagifem suppository is used a couple of times a week.  
• Both Estring and Vagifem produce a low dose of estrogen. This is considered to be helpful treating vaginal dryness with very little hormone released into the bloodstream. Generally thought to be safer than pills, patches, or creams. | • Some oncologists still worry about breast cancer survivors using these products. | |
<p>| Find comfortable positions for intercourse | • Certain positions may help avoid pain during sex. | • Requires good communication between partners. | |
| Learn to relax muscles around the vaginal entrance | • Learn methods of relaxation to avoid pain | • Can help minimize pain, but may not relieve pain if |</p>
<table>
<thead>
<tr>
<th>Treatment options for some types of sexual dysfunction</th>
<th>Pros</th>
<th>Cons</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>during intercourse.</td>
<td>scarring exists.</td>
</tr>
</tbody>
</table>
| Herbs and lotions | • Lotions may act as lubricants. | • No studies have shown lotions to help with sexual dysfunction.  
• Some lotions may be irritating to the skin or tissues.  
• Herbal remedies may interfere with other medicines or may have unknown dangers. |
| Clitoral pump (such as Eros) | • A small pump used to draw blood into the clitoris to increase sexual arousal. | • No scientific evidence that it works.  
• Costly and not covered by insurance.  
• Gives sensation similar to a vibrator. |

**Female Sexual Dysfunction: Additional Resources**

**LIVESTRONG Care Plan**  
[www.livestrongcareplan.org](http://www.livestrongcareplan.org)

This free online tool was created to help you develop a personalized plan for post-treatment care. It can help you work with your oncologist and primary health care provider to address medical, emotional and social challenges that may arise after cancer treatment is completed. By answering some questions related to your cancer treatment, you will receive information about your follow-up care. This information includes symptoms to watch for in the future and steps you can take to stay healthy.

**LIVESTRONG Navigation Services**  
[LIVESTRONG.org/Get-Help](http://LIVESTRONG.org/Get-Help)

Online: Complete an intake form through the LIVESTRONG website.  
Phone: 1.855.220.7777 (English and Spanish)  
Navigators are available for calls Monday through Friday, 9 a.m. to 5 p.m. (Central Time). Voicemail is available after hours.
LIVESTRONG offers assistance to anyone affected by cancer, including the person diagnosed, loved ones, caregivers and friends. The program provides information about fertility risks and preservation options, treatment choices, health literacy and matching to clinical trials. Emotional support services, peer-to-peer matching and assistance with financial, employment and insurance issues are also available. To provide these services, LIVESTRONG has partnered with several organizations including Imerman Angels, Navigate Cancer Foundation, Patient Advocate Foundation and EmergingMed.

**American Cancer Society (ACS)**
[www.cancer.org](http://www.cancer.org)

The American Cancer Society (ACS) offers information about many of the challenges of cancer and survivorship. You can search for information by cancer type or by topic. ACS provides a list of support groups in your area. You can join online groups and message boards. Some information on the website is available in Spanish, Chinese, Korean and Vietnamese. ACS specialists can answer questions 24 hours a day by phone or email.

**U.S. Institutes of Health - National Cancer Institute (NCI)**
[www.cancer.gov](http://www.cancer.gov)

The National Cancer Institute’s website provides accurate information about the challenges cancer can bring. You can search for information by cancer type or topic. You can find information about treatment, financial and insurance matters. You can also learn how treatments in development work and search for a clinical trial in your area. This site also has a good dictionary of cancer terms, drug information and other publications. Cancer information specialists can answer your questions about cancer and help you with quitting smoking. They can also help you with using this Web site and can tell you about NCI's printed and electronic materials. The knowledgeable and caring specialists have access to comprehensive, accurate information on a range of cancer topics, including the most recent advances in cancer treatment. The service is confidential, and information specialists spend as much time as needed for thorough and personalized responses.

Reprinted with permission by LIVESTRONG, 2011. All rights reserved. LIVESTRONG is a registered trademark of the Lance Armstrong Foundation. [www.LIVESTRONG.org](http://www.LIVESTRONG.org) offers free online information, tools, and support services for people affected by cancer and for professionals who provide cancer support.