# Everything you wanted to know about Sexual Health & Cancer but were afraid to ask!



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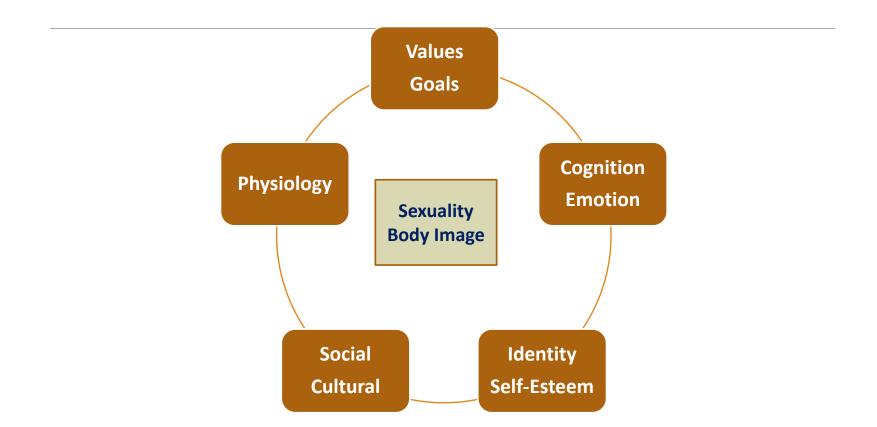


#### "No one really talks about it..."



- Culture is saturated with sex but lack of frank conversation about real challenges
- Confusion about who is responsible for initiating conversation
- Assumptions / misinformation / anxiety
- Clinicians often aren't sure what to say when a patients endorses a problem (pandora's box)

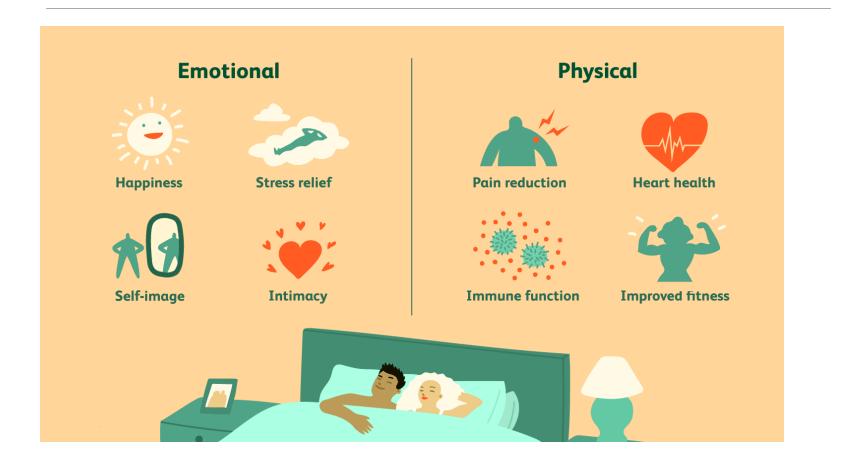
#### Sexual Health: What is it?



World Health Organization (WHO) Defining Sexual Health: Report of a Technical Consultation on Sexual Health (2006)



### Sexual Health and Well-Being





#### A Wide Range of Normal

- A central aspect of human experience across the lifespan
- Wide and varied range of normal functioning
- Different meanings/levels of importance to individuals
- If changes are **bothersome or distressing**, then this aspect of life deserves attention





#### Impact of Treatment...

Every type of cancer

treatment (surgery,

radiation, chemotherapy

and hormonal therapies)

has potential to disrupt sexuality/intimacy



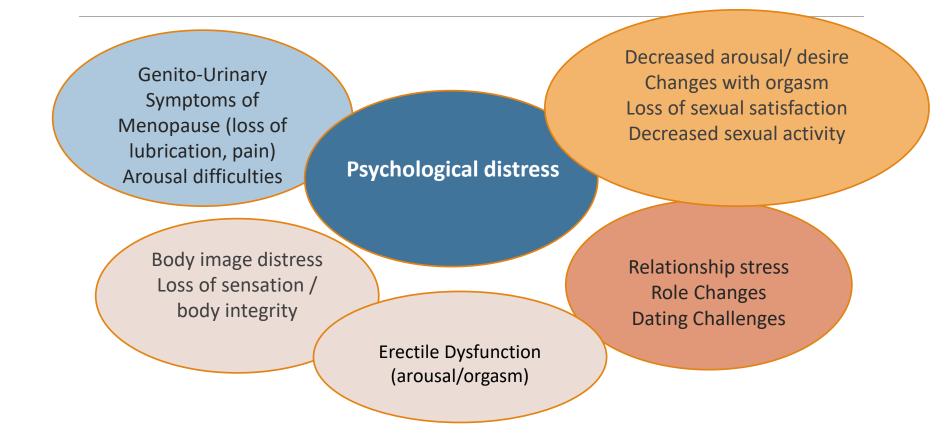




Very little data regarding targeted therapies and sexual health



#### **Common Sexual Health Problems**





#### Sexual Side Effects Not Always Obvious





### Menopause & Vaginal Health

Estrogen depletion  $\rightarrow$  genitourinary symptoms (GSM) that progress over time **Vaginal** Changes:  $\downarrow$  Blood Supply, Glycogen, changes in pH

vaginal length and diameter

Iubrication

Elasticity

Pain with sexual activity

↑ inflammation, infection

**Vulvar** Changes: ↓ Collagen,

↓ Testosterone (50% of T made produced by ovaries)

Urinary Symptoms: urgency, dysuria & recurrent UTIs

Cook et al, Menopause 2017; Faubion et al, Menopause 2018





### **Restoring Vulvo-Vaginal Health**















### Managing Vaginal Dryness

Vaginal moisturizers (3-5x week as needed)

- Lubricants: Water-based/Silicone, Glycerin/Perfume-free
- Coconut oil for perineum/ perineal massage
- If using panty-liners, consider using a sealant like Desitin

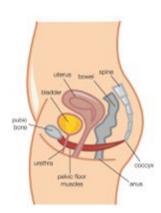
With your medical team, can discuss local vaginal estrogen / DHEA

Can be delivered by ring / tablet / cream





### Learning about the Pelvic Floor...



C Continence Foundation of Australia 2013

 Muscles/tissue stretches like a sling from tailbone to pubic bone.

 Muscles can lose tone/elasticity; highly reactive to emotional stimuli

• Ability to relax / control pelvic floor muscles aids in preventing discomfort sexual activity and/or pelvic exams.



### Pelvic Floor Rehabilitation!

- Learned Relaxation of the pelvic floor
- Vaginal Dilator Therapy
  - Mechanically increases stretch
  - Improves competence to relax
  - Addresses muscle-clenching reaction

- Pelvic Floor Physical Therapy
  - Manual Therapy, Biofeedback, Home-based exercises





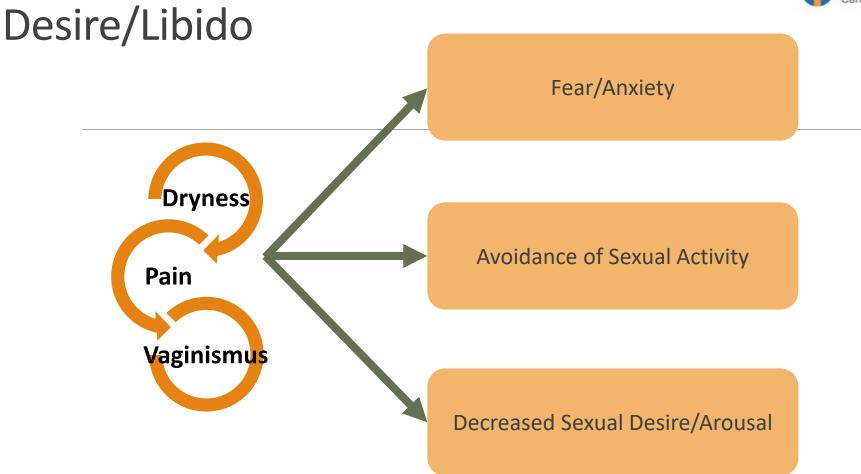
### Supporting Blood flow for Vaginal Health

#### Important to increase oxygenated blood flow to vaginal tissue

Vibrators are therapeutic!







Barni 1997; Brotto & Heiman, 2007; Burwell 2006; Jensen 2003; Fobair 2006

#### **Common Problems for Men: Erectile Dysfunction**

Modify reversible causes	<ul> <li>Medication change or discontinuation</li> <li>Lifestyle modification</li> <li>Hormone replacement</li> </ul>
First-line therapy	<ul> <li>Oral erectogenic agent</li> <li>Vacuum erection device</li> <li>Couples'/sexual therapy</li> </ul>
Second-line therapy	<ul> <li>Intracavernosal self-injection</li> <li>Intraurethral alprostadil</li> </ul>
Third-line therapy	<ul><li>Surgical prosthesis</li><li>Vascular reconstruction</li></ul>



#### Penile Rehabilitation: Uptake and Adherence

Majority of men with PC (50–80%) discontinue use of medical interventions for ED (pills, penile injections, vacuum devices) within one yr. of initiating treatment.

Use of adjunctive sexual rehabilitation counseling:

- increases efficacy of ICI treatment
- decreases drop-out rates



- increases rates of men who respond to oral medications
- provides education to help couples identify and use sexual aids

Titta et al, J Sex Med, 2006; Mulhall et al, BJU Int 2010;



#### Recovery is not only about the Physical Mechanics...

Other pieces of the sexual recovery puzzle include:

- Becoming aware of **automatic negative thoughts**
- Moving from avoidance and distraction to acceptance and change
- Challenging unhelpful assumptions around sexual roles, sexual scripts, & expectations
- Improving body image and perceived body integrity





Understanding sexual history & previous norms: clarify goals, increase communication, set action plan

- Re-focusing on Pleasure and Sensuality
- ✓ Helping couples expand their repertoire



- Behavioral exercises such as "Sensate Focus"
- Addressing concerns about dating
- Couples' counseling/couple-based support as needed





• Body image is not driven by any specific body part

Compassion for one's body / non-judging exploration

• Cultivate kindness, even in the face of loss. Focus on what your body can do, your sense of strength.

• Invitation to reimagine our sense of self and create a new chapter



#### **Reset the Frame**

- Acknowledge change/Accept loss/Validating new normal
- Embrace opportunity to chart new course
- Take your time...begin at your own pace
- Focus on specific goals and make an action plan



• Identify what you need: Support is available

#### Talk to Your Team

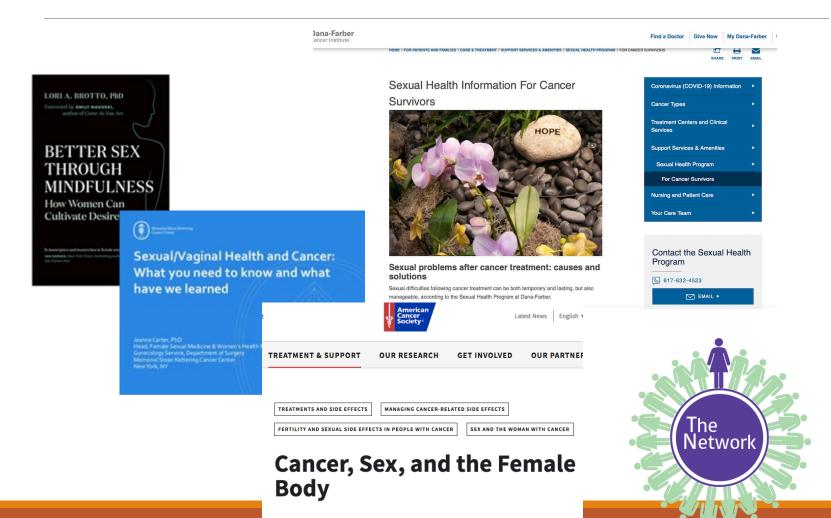


- Ask how treatment (risk-reducing surgery ) might have potential to impact sexual function or sexual health
- Ask how to get help with any side effects that are **bothersome** or **distressing**

- Ask who you might speak to for further information or support with expertise in sexual medicine
- Don't be afraid to keep seeing help until you get what you need!



#### Learn, Access Resources & Advocate!



**Cancer and sex** 



## THANK YOU!





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