

Reproductive Sexual Side Effects

What are they?

Cancer treatment can cause physical, hormonal, and emotional changes that affect your sexual drive, desire, and fertility. This may result from surgeries, such as *hysterectomy*, *oophorectomy*, or *prostatectomy*; chemotherapy; hormonal treatments; radiation treatments; or simply the stress and strain of cancer treatment and the corresponding fatigue, anxiety, and possibly depression.

What are the symptoms?

Changes in your reproductive abilities or sexuality because of cancer treatment may include:

- Gynecomastia. The formation of breast tissue in men.
- Impotence. The inability to achieve or sustain an erection.
- Infertility or sterility
- Irregular menstrual cycles or complete end of menstrual cycles
- Early menopause, including hot flashes and vaginal dryness
- Reduced sexual desire
- Painful intercourse

Some of these effects will improve after treatment finishes, but some may last over the long term or be permanent.

How are they diagnosed?

Most sexual and fertility issues are diagnosed on physical examination and/or in discussions with your health care professionals.

How are they treated?

Treatments for cancer-related sexual and reproductive side effects include:

- Hormonal therapy to minimize side effects.
- Individual or couples therapy to discuss the effects of the cancer on your relationship and intimate life.
- Sexual therapy to help you find ways to remain intimate.
- Medications for impotence, including Viagra® (sildenafil), Cialis® (tadalafil), and Levitra® (vardenafil).
- Vacuum constriction devices, penile injections, or penile prostheses for impotence.
- Medications to reduce hot flashes and vaginal dryness, including hormone therapy, anti-seizure medications, and antidepressants.
- Creams to lubricate the vagina to alleviate painful intercourse
- Vaginal dilators, lubricants, and/or hormonal creams can be used for radiation- or surgical-induced atrophy.



TIPS

Tips to Help

Coping with sexual dysfunction and reproductive problems is difficult. The following may help:

- Maintain open communication with your health care team and your partner. Talking about these issues is proactive and gives you more control over your situation.
- Be creative, patient, use touch, and have a good sense of humor.
- Sometimes discussing your fears, symptoms, and concerns with a therapist or counselor can help with issues of intimacy or sexuality.
- Do things that give you pleasure and focus on the good things in your relationships.
- Take steps to improve your self-esteem and feel better about how you look and feel.
- Practice birth control during treatment, even if your periods stop. You may still be able to get pregnant.
- Discuss sperm banking, egg retrieval, or embryo freezing with your doctor before treatment begins.

Words to Know

Hysterectomy: Surgical removal of the uterus.

Oophorectomy: Surgical removal of the ovaries.

Prostatectomy: Surgical removal of the prostate.