

[Home](#) > [Navigating Cancer Care](#) > [Dating, Sex, and Reproduction](#) > [Sexuality and Cancer Treatment: Women](#)

PDF generated on July 20, 2016 from

<http://www.cancer.net/navigating-cancer-care/dating-sex-and-reproduction/sexuality-and-cancer-treatment-women>

[Sexuality and Cancer Treatment: Women](#) [1]

This section has been reviewed and approved by the [Cancer.Net Editorial Board](#) [2], 02/2016

Cancer treatment can cause physical and emotional changes, both during and after treatment. Many women find that these changes affect their desire and ability to have sex. It is important to speak openly with your health care team about sexuality and intimacy before, during, and after treatment. Your health care team can help you find ways to cope with your concerns.

Common concerns about sexual health

Even treatments that don't affect your reproductive organs can affect your body image, mood, energy, level, and sense of well-being. Issues with sexual health that may arise because of treatment include:

- Decrease or loss of sexual desire
- Inability to achieve or maintain sexual arousal
- Decreased or absent lubrication
- Inability or difficulty to achieve an orgasm
- Pain during sex

- Increased unpleasant sensations or numbness in the genitals

It is common for sexual problems to develop during treatment, directly after treatment, or years later. Talk with a member of your healthcare team about your symptoms. This includes any new ones or a change in symptoms.

Treatments that affect sexual health

The following cancer treatments often affect a woman's sexual health, both directly and indirectly:

- **Radiation therapy.** Side effects such as fatigue, nausea, vomiting, and diarrhea, often decrease sexual desire. Radiation treatment to the pelvis can cause vaginal soreness for a few weeks after treatment. Scar tissue can form, narrowing or shortening the vagina, making sex painful. Women who have not been through menopause before radiation therapy can experience a sudden stop of their menstrual periods. This is called [early-onset menopause](#) [3] and may lead to reduced sex drive, vaginal dryness, itching, or irritation. Any and all of these side effects can result in painful sex.
- **Chemotherapy.** Side effects from chemotherapy such as weight gain or loss, nausea, vomiting and diarrhea, can affect sexual desire and self-image. Chemotherapy given directly to a tumor in the pelvis or the bladder can cause irritation. This irritation can make sex painful until the body heals. Younger women are also at risk for sudden loss of ovarian function from chemotherapy. This side effect may last a short time or it may be permanent.
- **Gynecologic surgery.** Surgery performed on the reproductive organs in the pelvis may affect the length of the vaginal vault or cause narrowing of the vagina. Some of these surgeries may include removal of the ovaries (oophorectomy), resulting in menopause in premenopausal women.
- **Colorectal or bladder surgery.** A person who has had part or all of the colon, rectum, or bladder removed may need a colostomy or urostomy. A [colostomy](#) [4] is a surgical opening used for waste to leave the body. A urostomy is a surgical opening for urine to leave the body. Both of these procedures can affect sexuality and sexual function.
- **Breast cancer surgery.** Losing part or all of a breast to surgery can change a woman's body image. Breast surgery can also change how your breast feels or cause a loss of feeling when touched.

- **Endocrine therapy.** Anti-estrogen treatments may cause symptoms seen with menopause, including hot flashes, vaginal dryness, pain with intercourse, and lowered sex drive.
- **Other drugs.** Some medications, such as certain painkillers or antidepressants, may decrease desire or interest in sexual activity.

Emotional concerns that affect sexuality and sexual functioning

Mental health plays a key role in sexuality. Emotions and feelings about cancer treatment can contribute to feeling comfortable with intimacy. Emotional challenges can include:

- [Fear of recurrence](#) [5], which is a return of the cancer
- [Stress](#) [6]
- [Depression](#) [7]
- [Anxiety](#) [8]
- Powerlessness
- Sadness
- Frustration
- Body image changes from surgical scars or openings that affect how you feel about your body

Your relationship with your partner may also be affected by your cancer diagnosis and treatment. In fact, your partner may experience some of these same challenges and concerns that you do. He or she may avoid intimacy due to fear of causing you pain.

What to do if you are experiencing sexual health concerns

Talk with your health care team if you are concerned about the potential sexual side effects of

treatment. It's also important to talk with them if you are experiencing any of the symptoms mentioned above.

If you are not comfortable talking with your doctor, talk with another member of the team. This person could include your nurse, nurse practitioner, or even a social worker. Find out what resources are available and whom you can see for further help. Often, the work-up will involve talking with you about the issues you are experiencing and a pelvic exam. You might need other tests (such as hormone levels) depending on the issues you are having.

If you are unsure of where to turn, ask your clinicians to refer you to a sexual health specialist.

Managing side effects

Relieving the physical side effects affecting your ability to have and enjoy sex is an important part of cancer care. Your clinician or other health care team member can give you information on management tools, including:

Vaginal moisturizers. These non-hormonal, nonprescription products used multiple times per week provide moisture to the vagina, improving vaginal health and comfort during sexual activity.

Vaginal lubricants. These are either water- or silicone-based and are used for sexual activity to increase comfort and pleasure.

Pelvic floor physical therapy. Pelvic floor physical therapy is useful for women with tight, tender muscles. It helps with relaxation, and if needed, strengthening of the pelvic floor muscles. Working on pelvic floor muscle health can help keep muscles relaxed and reduce pain during sex.

Vaginal dilators. For women with pain during penetration, these devices can increase comfort during sexual activity by stretching the vagina and reducing tightness. They come in various diameters and the size of the dilator can be increased as the vaginal stretch improves. These are often used along with pelvic floor physical therapy.

Low-dose vaginal estrogen. The use of estrogen inserted into the vagina can help restore vaginal health. These are often given as a flexible ring, cream, or tablet. Women should talk with their oncologists to see if the use of these medications is appropriate for them.

DHEA (didehydroepiandrosterone). Vaginal DHEA may help treat vaginal dryness and/or painful sexual intercourse, without increasing estrogen levels.

Vaginal lidocaine. Lidocaine, applied to the vaginal opening just before sexual activity, may decrease pain and increase satisfaction.

Managing emotional side effects. Relieving the emotional side effects, in addition to the

physical ones, is just as important for your sexual health. Your health care team and/or social worker can provide the following resources:

- Education
- Referrals to community resources
- Help for you and your partner to develop effective coping strategies

[Talking with other cancer survivors](#) [9] in local support groups or online support communities can also help. Through support groups, you can learn how other women are coping with changes to their bodies and sexuality.

More Information

[Dating and Intimacy](#) [10]

[Talking with Your Doctor About Sexual Health](#) [11]

Moving Forward Video: [Dating and Sexuality](#) [12]

[Side Effects](#) [13]

Additional Resources

American Association of Sexuality Educators, Counselors and Therapists: [Locate an Expert](#) [14]

LIVESTRONG Foundation: [Female Sexual Health after Cancer](#) [15]

Links

- [1] <http://www.cancer.net/navigating-cancer-care/dating-sex-and-reproduction/sexuality-and-cancer-treatment-women>
- [2] <http://www.cancer.net/about-us>
- [3] <http://www.cancer.net/node/25257>
- [4] <http://www.cancer.net/node/24724>
- [5] <http://www.cancer.net/node/25241>
- [6] <http://www.cancer.net/node/24589>
- [7] <http://www.cancer.net/node/30346>
- [8] <http://www.cancer.net/node/30336>
- [9] <http://www.cancer.net/node/25383>
- [10] <http://www.cancer.net/node/25297>
- [11] <http://www.cancer.net/node/33091>

[12] <http://www.cancer.net/node/28086>

[13] <http://www.cancer.net/node/25238>

[14] <https://www.aasect.org/referral-directory>

[15] <http://www.livestrong.org/we-can-help/finishing-treatment/female-sexual-health-after-cancer/>