

# Sexual Dysfunction

## What Is It?

As a result of breast cancer treatment, women may experience a variety of sexual dysfunction symptoms, including vaginal dryness, recurrent urinary tract infections, yeast infections, painful intercourse, and loss of sexual interest (decreased libido).

## What Causes It?

Many physiologic, psychologic, interpersonal, and sociocultural factors may contribute to sexual dysfunction. Breast cancer treatments including surgery and chemotherapy may cause early and more severe menopausal symptoms, as well as fear, depression, anxiety, body-image concerns, and treatment-induced physiologic changes. Ongoing treatment with aromatase inhibitors and Tamoxifen may also play a role in these symptoms.

## How Common Is It?

The true incidence of sexual dysfunction amongst breast cancer survivors is unknown (either because patients don't report it or medical providers don't ask), but reports indicate that at least 40% of women may experience some degree of sexual dysfunction following breast cancer treatment.

## What Can Be Done About It?

The complexity of female sexual dysfunction necessitates a bio-psycho-social approach to assessment and management, with interventions ranging from:

- Over-the-counter moisturizers
  - Replens is a non-hormonal moisturizing gel recommended up to 3x a week for maintenance
  - Oral or vaginally applied vitamin E in daily doses of 100-600 IU helps increase vaginal lubrication
- Over-the-counter lubricants
  - Astroglide or KY jelly reduces pain with intercourse
- Education and lifestyle changes
- Sexual counseling or therapy
- Treatment for ongoing anxiety/depression
- Pelvic floor exercises and therapies
- Nutritional supplements, such as cranberry extract, may reduce urinary tract infections
- Prescription medications, such as low-dose, local vaginal estrogen therapy (Vagifem, Estring) are not well-absorbed into the bloodstream, and may be considered for highly symptomatic early breast cancer patients. The long-term safety of this is currently being evaluated.
  - If your vaginal/sexual symptoms persist despite non-hormonal interventions, ask your oncologist if this is a short-term option for you.