Sexuality & Intimacy
When Facing Bladder Cancer

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“The secret to change is to focus all of your energy not on fighting the old but on building the new”
Objectives

» Explore cancer-associated sexual health and intimacy changes for both men and women (patients and partners)

» Discuss practical issues in handling sexual problems

Disclaimers

• No financial gains, research or publications to date
• I’m not a sex therapist
  » I’m not recommending risky behaviours
Acknowledgement

» My Colleagues
» The Cancer Centre Sexual Health Advisory Committee
» de Souza Institute
2017
1 in 2
Canadians will
develop Cancer in
their lifetime

Cancer Treatments

Quality of Life

Survival

Side effects

Surgery
Chemotherapy
Immunotherapy
Radiation Therapy
Hormone Therapy
Surveillance
Learning how to respond differently
Increasing evidence is mounting that health care providers need to address sexual health and intimacy concerns with patients.
Barriers to addressing sexual health issues include:

- Lack of knowledge and training to deal with issue
- Discomfort
- Perspective on own role
- Lack of time and privacy

Fitch, Beaudoin & Johnson, 2013
Sexual Dysfunction
Dispelling Sexual Myths
Sexual dysfunction is the one lasting side effect of treatment that accounts for the greatest loss in quality of life for men and their partners.

Beck et al, 2013
BioPsychoSocial Model
Dimensions of Sexual Health

- Physical
- Psychological & Emotional
- Social & Relational
- Informational
- Spiritual

Slide adapted with permission from Cancer Care Ontario’s presentation “It’s Time to Talk: Starting the Conversation Around Sexual Health in Cancer”
» Fatigue
» Loss of Libido
» Vaginal Changes
» Pain
» Penile Changes
  > Erectile dysfunction (ED)
  > Decrease in penile size
» Orgasm changes
  > Inability to reach orgasm (anorgasmia)
  > Loss of ejaculate
    + Orgasm but no ejaculate
    + Climacturia
      – Leakage of urine at climax
  > Painful orgasms
    + Dysorgasmia
  > Orgasm intensity changes
» Infertility
» Urinary & Bowel changes
Psychological & Emotional Effects

- Sense of vulnerability
- Worry about loved ones
- Concerns about the reaction of one’s sexual partner
- Changes in body image
- Lowered self-esteem
  - Some feel ‘cheated’ of their manhood
- Mood changes
  - Anxiety, depression, anger, +/- grief, loneliness
- Emotional response to infertility
- Fear of relapse
- Devotion
Social & Relational Effects

» Struggle with resuming sexual activity
» Communication about sexual difficulties
» Renegotiation of roles
» Psychological distress of sexual partner
» Concern about starting new social or intimate relationships
» ↓ relationship satisfaction, ↑ tension +/− distress
» Fear of abandonment
Communication
Renegotiation
Normalize, Validate & Re-educate
Re-education on anatomy, function and change of sexual script
Products/tools to assist in pleasure & comfort
Mindfulness exercises
What gives you strength?
- Love & Compassion
- Meaning of Illness +/- Pain
- Inner Strength & Peace
- Hope
- Uncertainty

Therapies
- Music
- Art
- Exercise
- Journaling
- Mindfulness
Barriers to Conversation

Environment – Want to converse in a private area

Time – There’s not enough time for conversations

Training – not included in many in training programs

Resources – Lack of awareness and access

Comfort Level – Personal areas of discomfort

96% of health care professionals identified that sexual health concerns were part of their scope of practice.

Despite this, only 2% reported regularly asking patients about their concerns

(Hautamaki et al., 2007)
Interventions to Address Sexual Problems in People with Cancer

It is vital that members of the healthcare team initiate a conversation about sexual health with cancer patients. This is the first essential step that should be taken by healthcare providers so further support can be given.

The Burden
Sexual dysfunction in cancer patients is a significant problem.

- Up to 85% of women with cancer (breast, cervical and colorectal) may experience difficulties with sexual function.
- Up to 95% of men with cancer (prostate, testicular, colorectal and bladder) may experience sexual difficulties.

Sexual Health Related Distress

- 60% of men with cancer report distress due to sexual dysfunction.
- 50% of women are distressed by changes in sexual functioning and body image after a gynecologic cancer diagnosis.
- More than 50% of women with breast cancer have distress due to sexual dysfunction.
- The majority of partners of prostate cancer patients also report significant distress.
Unmet Needs in the midst of the difficult news....

We will deal with sexual health later...
Possible Concerns

The Aftermath

Reclaiming Your Sex Life
Patient Experience - Adapting to Change

Redefining 'sex' as "not just about penetration"

Embracing intimacy

Maintaining or re-establishing satisfying sexual intimacy

Using sexual or medical aids

46% of men with prostate cancer stated that sexuality counselling would have been helpful (Kirby, Watson, & Newling, 1998).

(Ussher, et al., 2013)
Bladder Cancer
» Identify Risk

» Bladder Preservation Therapy

» Radical Cystectomy

» Salvage Therapy

» Treatment decisions
  > Functional & overall health status
  > Patient desires & goals
  > Informed understanding of risks & benefits

Treatment for Bladder Cancer
May have burning, pain, stinging, pinching (Bladder or Urethra), or a need to pass urine frequently

May notice blood in the urine

Investigation vs Treatment

- Recovery is Individualized
- Intravesical Treatments
  + Possible additional precautions
    - Condom use
    - Effective contraception during treatment
Potential Issues.....

» Repeated Cystoscopy

> Less desire for sex
> Temporary pain with erection or ejaculation
> Coital pain
> Negative body image
> Sense of genital contamination
> Fear of passing cancer or drug treatment to your partner
The Aftermath....
....Is the “Plumbing” Still Working down there?

The End of Sex?
From Caregiver to Sexual Partner...
Learn to Adapt
The Journey To Solutions

✓ Acknowledging the grief of the loss
✓ Recognizing the fear, changes and possible enjoyments may not return
✓ Making a choice to remain open to discussing feelings & concerns
✓ Remaining open to explore options to redefine intimacy
✓ Staying committed to homework
Consideration of Life-Style Factors

» Smoking Cessation
» Limit Alcohol Intake
» Diet
» Weight loss
» Exercise Most Days of the Week
» Sleep
» Leisure
» Relaxation & Reduction of Stress
» Work through Relationship Conflict
Causes of cancer related fatigue

- Cancer itself
- Cancer treatments
- Sleep problems
- Pain
- Emotional distress
- Anemia
- Medications
- Fatigue before treatment
- Nutrition problems
- Lack of physical activity
- Other medical problems
Communication
Sensate Focus Exercises

» The cornerstone of sex therapy

» Helping couples to focus on sensation rather than performance
  > Exercises in which sex partners take turns giving and receiving pleasurable stimulation
  > Works to build trust and intimacy in a couple’s relationship
  > Focus – meditate on the sensations, work to stay in the moment instead of following distractions of thought

» Structured and flexible

» Homework

How to Talk to Your Partner

About Painful Sex

Cycle of Pain

1. The body anticipates pain; fear/anxiety may contribute
2. The body automatically tightens vaginal muscles
3. Tightness makes sex painful; penetration may be impossible
4. Pain reinforces/intensifies reflex response
5. Body reacts by 'bracing' more on ongoing basis
6. Avoidance of intimacy, lack of desire may develop
Pelvic Physiotherapy

- Treatment may include pelvic floor muscle exercises +/- biofeedback or electrical stimulation:
  - Urinary incontinence management
  - Enhanced sexual response

- **Successful treatment facilitates:**
  - Greater self-awareness, self-confidence & feelings of empowerment
  - Improved body image
  - Lowered anxiety

Rosenbaum, 2008
Physical Affection

- Holding hands
- Hugging
- Physical Touch
- Kissing Cuddling

Relationship Intimacy

- Self-disclosure
- Emotional Connection
- Shared Interests & Values
- Shared Dreams
- Sensual Massage
- Genital Caressing
- Mutual Masturbation
- Outer-course
- Sex Toys
- Oral Sex

Continue Embracing Intimacy
Targeted Treatment Zone

- Bowels
- Bladder
- Bones
- Sexual Organs

Pelvic Radiation
Vaginal Dilation & Rehabilitation

» 2-3 times a week

» Preventing/Treating
  > Vaginal stenosis
  > Adhesions
  > Dyspareunia
  > Learning depth of penetration & gaining confidence
  > Pelvic examinations
Basson’s non-linear model acknowledges how emotional intimacy, sexual stimuli, and relationship satisfaction affect female sexual response.
<table>
<thead>
<tr>
<th><strong>Vaginal Moisturizers</strong></th>
<th><strong>Vaginal Lubricants</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Available in gels, tablets or liquid bead</td>
<td>Available in gel or liquids</td>
</tr>
<tr>
<td>Administered with applicator or as a vaginal suppository</td>
<td>Applied in the vagina and around the genitals (partner too) prior to sexual activity. May need to be re-applied during sexual activity</td>
</tr>
<tr>
<td>Used to hydrate the vagina and improve vaginal pH</td>
<td>Used to minimize dryness and pain <strong>during sexual activity and gynecologic exams</strong></td>
</tr>
<tr>
<td>Non-hormonal and over-the-counter</td>
<td>Water and silicone based recommended water based washes away more easily</td>
</tr>
<tr>
<td>Best applied at night</td>
<td></td>
</tr>
<tr>
<td><strong>Lasts up to 2-3 days then needs to be re-applied (use 2-3 times/week)</strong></td>
<td></td>
</tr>
<tr>
<td>Examples: RepaGyn®, Gynatrof®, Replens®, Vitamin E capsules (puncture prior to insertion), Me Again®, Hyalo-Gyn®, Zestica®, PreMeno Duo®, Luvena®</td>
<td><strong>Examples:</strong> Astroglide® Liquid Silk, KY, O’My</td>
</tr>
</tbody>
</table>
Healthy Vagina

- Vaginal lining is thick and moist
- Vaginal walls are elastic
- Vaginal lubrication is present

Vaginal Atrophy

- Vaginal lining is thin and dry
- Vaginal elasticity decreases
- Vaginal dryness
- Shortening of the vaginal canal

The medication is approved to treat vaginal inflammation caused by thinning of the vaginal tissues, usually the result of low estrogen levels after menopause.
Sex with an Ostomy

» Confidence
» Self-Esteem
» Anticipate issues before they become embarrassing/funny
  - Manage your appliance/accessory
    - Empty & clean pouch
    - Make sure the seal is tight
    - May wish to use an opaque pouch or pouch cover
    - Positioning of pouch
  - Can use lingerie or special cummerbunds/wraps to conceal the pouch
  - Choose comfortable positions
» Your stoma is not a sex organ
Erectile Dysfunction

» The inability of a man to attain an erection to complete sexual intercourse

» Lifetime prevalence is 50%

» Penis relies on a number of factors:
  > Hormonal
  > Musculature
  > Vasculature
  > Neural inputs

» May include:
  > Inability to initiate an erection
  > Inability to get hard enough for penetration
  > Inability to maintain an erection through to the completion of intercourse

» May be associated with:
  > Orgasm problems
  > Ejaculation problems
  > Penile shape issues (curvature)
Medical Management for ED

- Phosphodiesterase type 5 inhibitor (PDE5i) medications: Sildenafil (Viagra), Tadalafil (Cialis), Vardenafil (Levitra)
- Vacuum Erection Device (VED)
- Medicated Urethral System for Erection (MUSE)
- IntraCavernosal Injections (ICI)
- Penile implants
Treatment of ED

» Identify and treat risk factors
  > Primary ED vs Secondary ED

» Diagnosis

» Counsel & educate

» Identify & treat any psychosexual dysfunctions

» Medications & Devices

» Homework
Phosphodiesterase Type 5 Inhibitors (PDE5 inhibitors)

Success rate for all types of PDE5 Inhibitors ~80% ~$20/pill

- **Sildenafil—Viagra 25-50-100 mg**
  - 60 minutes before sexual activity
  - 4-6 hour window
  - Absorption delayed by fatty meal

- **Vardenafil—Levitra 5-10-20 mg**
  - 30-60 minutes before sexual activity
  - 4-6 hour window
  - Absorption delayed by fatty meal
  - Prolong QT

- **Tadalafil—Cialis 5-10-20 mg**
  - 5 mg daily with or without food
  - 30 minutes before sexual activity
  - 36 hour window (unplanned sex)

- **Yohimbe**
  - Bark of yohimbine tree in Central Africa
  - Central Nervous System
  - Health Canada Warnings
  - An alpha 2 Adrenoreceptor blocker

❤ Still requires *sexual stimulation* to have an erection
❤ May need to try a few times
❤ Some men respond better to one PDE5 inhibitor than to another & vice versa
Side Effects

✓ Headache (20%)
✓ Indigestion\Dyspepsia (10%)
✓ Flushing (15%)
✓ *Nasal congestion (6%)
✓ Dizziness
✓ Visual disturbance (Blurred & blue halo-6%)
✓ Backache & Myalgia (5%)
✓ *Priapism (rare)
  ✓ Persistent & Painful erection
✓ Non-arteritic anterior ischemic optic neuropathy
Contraindications

» Not to use with **nitrates**
» Not to use if recent or severe CV disease
» Hypotension
» Cautious use of Vardenafil (Levitra) if prolonged QT
» Care if on Alpha Blocking agents (Tamsolusin)
  > May cause significant hypotension
» **Cytochrome P450 Inhibitors (Drug Interactions)**
  > Cimetidine, Ketoconazole, Erythromycin
» **Anatomical deformity**
  > Angulation, cavernosal fibrosis, Peyronie’s
» **Predisposition to prolonged erection**
Vacuum Erection Devices (VED)

» Blood trapped in intracorporal and extracorporal compartments of penis (engorged by negative pressure)

» Erections satisfactory for intercourse ~90%, but ↓ to 50-60% after 2 years

» Can be used to help prevent penile shortening

» Constriction Ring at base of penis
  > Maximum time 30 minutes
  > Penis pivots at base below ring
  > Cyanosis, edema, cold & bruising
  > No ejaculation
  > Discomfort in orgasm
  > Caution in pts taking Aspirin & Warfarin

» Medical Grade Pump ~$500
Intraurethral Alprostadil

» Alprostadil Pellet (MUSE) Efficacy ~50%
  > Medicated Urethral System for Erections
  > 125mg, 250mg, 500mg, 1g

» ~$35

» Pellet inserted with applicator

» Massage penis to aid absorption

» Side effects:
  > Penile pain/burning 10-30%
  > Dizziness
  > Hypotension
  > Priapism rare
Intracavernosal Injections

- **Efficacy rates** ~90%
- **Adverse effects:**
  - Pain
  - Priapism
    - + Prolonged erection
  - Hematoma
  - Fibrosis
- **Contraindications:**
  - + Men at risk of priapism (1%)
  - + Men with bleeding disorders
Penile Implants

Invasive surgical procedure

- Risk of infection
- May need to be replaced depending on type of implant

Inflatable Penile Implant

External Penile Devices

Image retrieved on November 26, 2018 from: https://www.theelator.com/
Resources

Sexual Health Adult Retail Options

» Find out what they are all about....
  > Re-kindle sexual interest
  > Experimentation
  > Products
    + Sex Toys
    + Lubricants and more...

○ Canadian Cancer Society

○ Supports within Your Cancer Program

○ Online
  ● Come As You Are: www.comasyouare.com
  ● Good For Her: www.goodforher.com
    ○ Both are based out of Toronto
Communication is required

Change sexual scripts to enjoy pleasure & maintain intimacy in relationships

Consider requesting a referral for help
References and Resources


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