

Many changes are happening in your body due to cancer and cancer treatment. Some of these changes can affect your sexual health. Your desire for sex is influenced by biological and psychosocial factors. The changes that happen because of cancer can be short-term or long lasting. They can start during cancer treatment or after treatment ends. Talk with your partners and ask questions of your health care team to ensure you have the information and support you need.

Cancer and cancer treatment can affect sexual health:

- Cancer and its treatments may damage sexual organs and affect hormone levels. This can lead to lower testosterone or estrogen levels which can affect sexual desire and fertility (ability to have children).
- Lower estrogen levels can also cause vaginal dryness, itching or burning that may make sex painful.
- Removal of the prostate may alter the sexual experience.
- Small amounts of cancer treatment drugs may remain in semen, vaginal discharge and urine up to a week after treatment and can be passed on to partners.
- Radiation therapy for gynecological and [anal cancers](#) can cause problems with inflammation, irritation, bleeding and scarring.
- Supportive care drugs used with cancer treatment can help in [managing side effects](#) (i.e. opioids for managing pain) but can have an impact on fatigue, sleep and [emotions](#).
- Cancer and its treatments may damage blood vessels or nerves. This damage may cause erection dysfunction (not being able to maintain or have an erection), painful erection or dry orgasm.
- Some cancer treatments may cause [peripheral nerve damage \(neuropathy\)](#). Neuropathy causes pain, numbness or tingling in your fingers, toes and limbs. Often neuropathy is temporary but nerves heal very slowly.
- Damage to nerves and tissue after a mastectomy can result in loss of sensation and/or [post-mastectomy pain](#).
- Cancer treatments can cause bowel inflammation, urgency and loss of bowel control. In some cases a stoma (an opening on the skin of the abdomen where bowel movements flow into a bag) may be required.
- Stress, anxiety, depression and other emotions can have an adverse effect on sexual health.

Changes in appearance:

Cancer treatments may change how your body looks. Most changes are short-term but some can be lasting. Side-effects can include [hair loss](#), scars or weight loss/gain. Changes can affect how you feel about the way you look. Your feelings can affect your intimate relationships. Look for strengths and be gentle and kind to yourself when coping with changes and losses. Give yourself time to adjust and heal.

Talking with your partners:

Talking with your partner about your fears and concerns is a part of a healthy relationship. For some couples, talking about sexual health can be difficult. Some people may pull away and suffer in silence. It is important to talk to your partner about how cancer is affecting your relationship.

Explore new ways of connecting with your partner and adjust your usual sexual activities. Some people say that they feel closer to each other during difficult times because they talk more and expect less. If you and/or your partner need help in talking about the impact of cancer on your sexual health make an appointment to speak with a counsellor.

Talking with your health care team:

Do not be shy about talking with your health care team about your sexual health. Your health care team can help by reviewing your situation, talking about options and making referrals.

Questions you can ask:

- Do I need to stop having sex for a while?
- Will I have lasting changes such as treatment-induced menopause? Can I use estrogen creams?
- Do I need to use condoms/contraceptives (to protect against pregnancy and transferring body fluids)?
- Can I use any drugs or devices for erectile dysfunction?

Things you can do:

- Use lubricants, creams, vaginal dilator or devices for erectile dysfunction.
- Learn exercises for pelvic muscles. This can lower pain, improve urinary retention and bowel function, and increase blood flow.
- Make an appointment to talk to a counsellor or join a support program.
- Talk to your doctor about a referral to a sexual health clinic.

Having children (reproduction and fertility):

Cancer treatments can have an effect on fertility. You may become infertile (unable to have children) if there is damage to organs or hormone levels. Some people may be affected by [treatment-induced menopause](#) or [erectile dysfunction](#). Talk to your health care team before treatment starts. You should know about your options for fertility preservation (saving or protecting eggs, sperm or other tissue) so you might have children in the future.

Questions you can ask:

- What is the risk of infertility from the recommended treatments? Will infertility be short-term or long lasting?
- What options do I have to preserve my fertility? Are there other treatments that will not affect my fertility?
- Will these options postpone the start of my treatment? If so, how would this affect my chance of recovery?
- Should I talk with a fertility specialist?
- Where can my partner and I find support for coping with fertility issues?
- How will I know if I am fertile after cancer treatment?

To learn more:

- BC Cancer, Library - [Pathfinder](#)
- BC Cancer - [Patient & Family Counselling](#)
- Canadian Cancer Society - [Sex, Intimacy and Cancer](#)
- Cancer.net - [Dating, Sex and Reproduction](#)
- Cancer.org - [Cancer facts for gay and bisexual men](#)
- Cancer.org - [Cancer facts for lesbians and bisexual women](#)
- Vancouver Coastal & Canadian Rainbow Health Coalition - [Trans people and cancer](#)

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www.bccancer.bc.ca/health-info/coping-with-cancer/managing-symptoms-side-effects