

Mayo Clinic Q & A - Dr. Jennifer Vencill - Sexual health aft...

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sexual health, sexual, sex, partner, treatment, cancer treatment, cancer, patients, general, sexual activity, pain, mayo clinic, surgery, people, vulva, exploration, support, impact, domains, important

SPEAKERS

Dr. Halena Gazelka, DeeDee Stiepan, Narrator, Dr. Jennifer Vencill

D DeeDee Stiepan 00:00
Coming up on Mayo Clinic Q&A,

D Dr. Jennifer Vencill 00:03
We need to be really, really patient with our physical and our mental health as we recover from an ordeal that for many, many people is incredibly traumatic, often rediscovering our optimal sexual health after a major illness and traumatic process that comes with that requires a lot of patience and exploration.

D DeeDee Stiepan 00:21
Treatment for certain cancers can affect your sexuality, causing a range of signs and symptoms that can make sex with your partner more difficult. But that doesn't mean you can't have a healthy sex life after cancer treatment.

D Dr. Halena Gazelka 00:33
It's really important for folks to know and for your audience to know that there's treatment available and way more options out there than most people think. There's so many more options than there ever used to be. Welcome, everyone to the Mayo Clinic Q&A podcast, I'm your host, Dr. Halena Gazelka. Treatment for some cancers can affect sexuality, causing a range of signs and symptoms that can make sex more difficult. Having cancer also affects

emotions, which can also affect one's attitude toward sex and intimacy with a partner. Here to discuss how cancer and cancer treatment can affect sexual health, is Dr. Jennifer Vencill, a Mayo Clinic psychologist. Thanks for being here with us again today, Jennifer.

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Dr. Jennifer Vencill 01:16

Thanks for having me, Halena. It's great to be back.

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Dr. Halena Gazelka 01:18

Well, and I always learn something when we have you on the podcast, so I'm delighted to have you here. What are the most common sexual side-effects after cancer treatment?

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Dr. Jennifer Vencill 01:28

Well buckle up for maybe a long answer, because there actually are a lot I think that we don't tend to give much thought to unfortunately. So, you know, I'll first preface that by saying sex and sexuality are multifactorial. They're incredibly complex. But we typically break sexual functioning into four general domains when we're talking to patients about sexual concerns. So, those domains are arousal, desire, orgasmic/ejaculatory function, and pain, of course, with sex. There's overlap between those four domains, but in general, we might see things like for arousal, this is the physiological side of sexual arousal. So, we might see changes during or after cancer treatment in how one's body experiences sexual arousal in that way. So, that could be difficulty with erections for example, or thinning of the vulva vaginal tissues, or dryness of those tissues. That could be a problem for sexual activity. With desire, also known as libido, so this is kind of a psychological interest in sexual activity, very commonly lowered interest in sex, or loss of libido in sexual activity during or following cancer care. And then the orgasmic or ejaculatory domain, it is very common for patients to experience changes in their sensitivity. So, this might be numbness in parts of the body, neuropathy, tingling sensations that can really disrupt their ability to reach sexual climax or orgasm. Ejaculatory function in particular can be greatly impacted by things like prostatectomy surgeries, or treatment for prostate cancer in particular. And then the final category of pain. So, sexual discomfort and pain in particular can be directly related to cancer care. So, that could be a surgery, perhaps in the pelvic area, or the genital area or reproductive organs. But pain with sex can also be indirectly related. There's a couple of ways that that could happen. So, this might be chemotherapy or radiation in the pelvic area leads to vulva vaginal dryness, which then in turn creates pain with vaginal penetration, or a surgery creates hormonal changes. So, something like an oophorectomy where the ovaries are removed, and sex hormones change really dramatically. That could lead to a similar outcome where there's vulva vaginal dryness and pain or discomfort with penetrative sexual activity. So, those are kind of the four big domains that we start to see sexual side-effects from cancer treatment. And then of course, we can't neglect the mental, emotional, relational impact that treatment can have on both the patient, and of course, their sexual and/or romantic partners. For many partners who are also caretakers, navigating sex amidst cancer treatment and kind of the cancer survivorship period can really be a unique and challenging reality for a lot of folks.



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Dr. Halena Gazelka 04:25

So Jennifer, it sounds to me like from a treatment viewpoint, that sometimes it's a surgical or radiation perhaps, or even drug related like a chemotherapy or something like that side-effects essentially.

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Dr. Jennifer Vencill 04:41

Correct. Yeah. So, we can have this direct sexual effect or impact, if you will. So, a surgical procedure, especially to the pelvis, of course, can really directly impact the nerve endings, the muscle groups, so, the pelvic floor muscles, for example, that are directly involved in our sexual response, and so that can be kind of these very clear direct impacts from cancer treatment on sexual health. But a lot of them are less direct, maybe more indirect, or what we would consider kind of a cascade effect of treatment. So, this commonly comes up with loss of libido or decreased desire for sexual activity. So, that could be indirectly related to anything from fatigue to nausea because of chemotherapy, to body image concerns. That might be about surgery, for example, mastectomy for breast cancer patients comes up a lot. Loss of libido could also be related to pain that has come from a surgery. So, we can see these kind of cascade effects very clearly for patients.

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Dr. Halena Gazelka 05:44

What should patients ask their physicians or their treatment teams so that they're prepared for the sexual side-effects that might come with their treatment for cancer? That's such a great question. I really appreciate you asking it. You know, I think the first thing I would be remiss not to mention is that folks should be aware that unfortunately, there are many medical providers who are reluctant, or they just feel unprepared to counsel their patients about sexual side-effects related to cancer treatment. And that's kind of on the medical education side of things. That's work that we're still trying to do. And so, it's really important to be your own advocate here, even if it feels like a bit uncomfortable. It's a topic that most of us are not taught to talk about openly, really, with anyone, much less medical providers, but it's really important to be your own advocate here and to ask questions. So, what to ask about, ask about expected body changes from treatment, ask about common effects on those four sexual function domains that we just talked about. So, arousal, desire, orgasm/ejaculation, any discomfort or pain that might result from care. And then of course, what care is available if you have difficulties. So, it might not present right away. Many people initially after a diagnosis can understandably be shell shocked, and they're focused on simply surviving. Of course, of course they are, so sometimes sexual health concerns come later down the line. But it's important to know what support you have. So, ask about resources, certainly websites, books, support groups in the area or online, but also any sexual health specialists that are in your area. So, sexual medicine providers, sex therapists like me are often really well versed in helping patients navigate sexual side-effects and sexual recovery after cancer. So, you mentioned sexual recovery. So, is it possible to regain sexual function? And are there things that individuals can actively be working on to help promote that for themselves?

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Dr. Jennifer Vencill 07:46

Absolutely, it's not always a return exactly to what it was pre cancer diagnosis and treatment, sometimes, but that's not always the case. You know, I think those words come to my mind

sometimes, but that's not always the case. You know, I think three words come to my mind here when I think about regaining sexual functioning and what we can do. And those words are patience, exploration, and support, right. So, we need to be really, really patient with our physical and our mental health as we recover from an ordeal that for many, many people is incredibly traumatic to go through this process. And often rediscovering our optimal sexual health after a major illness and traumatic process that comes with that requires a lot of patience and exploration. This could be anything from relearning our body sensations and our erogenous zones, something that we refer to as body mapping in the sex therapy world. Or it might be getting comfortable in a body that has really drastically changed in how it looks or how it works. This might be exploring sexual aids and things that you maybe previously hadn't thought about incorporating into your sex life, whether solo or with a partner. And oftentimes, exploration on one's own is really beneficial to start to understand your new normal, a phrase that I don't love in these COVID times, because we overuse it, I think. The new sexual health normal following cancer care, sometimes it's helpful to really do that exploration on our own before we kind of move into partner exploration just to kind of get a sense of baseline, a sense of personal comfort, those sorts of things. And then the support piece of course, as I mentioned before, you know, you always want to ask your care team about resources and sexual health specialists in the area. It's really important for folks to know and for your audience to know that there's treatment available, and way more options out there than most people think. So, we have excellent treatment options for folks that are struggling with vulva vaginal dryness, with sexual pain, with erectile concerns, and so on. There's so many more options than there ever used to be. There are also amazing mental health providers who specialize certainly in sexual health, sex therapy, but there are also mental health providers out there that specialize in oncology care, cancer care. So, they help folks work through the process of cancer treatment and cancer survivorship as well. And so, it's really important to be aware of those support systems and to make use of them.

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Dr. Halena Gazelka 10:12

I was interested in what you said earlier about how people kind of get in a survival mode where they are just trying to get through. I've been very open about the fact that I was diagnosed with breast cancer earlier this year, and went through surgery and radiation, etc. And I was amazed. And I work in a healthcare setting. So, you think I would know better how much energy and time it takes just to go to appointments.

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Dr. Jennifer Vencill 10:35

Oh, yeah.

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Dr. Halena Gazelka 10:36

Just to wait in the waiting room into and of this other stuff. And then there's an emotional impact that comes after that. So, what is the best way for individuals to recognize their own emotional needs and get them met during and after cancer treatment?

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Dr. Jennifer Vencill 10:54

I think for me, this is knowing that it's expected, right. And so, it's not a matter of, if it's sort of a matter of when, or really just sort of when you decide you're ready to seek support, right. So, you know, in general psychological and emotional stresses, it's a barrier to sexual health, of course, but it's also really common, if not entirely predictable, in the face of a major life stressor, like cancer and cancer treatment, and all that you are going through physically, emotionally, mentally, relationally, as you mentioned. And so, we know that symptoms of stress, anxiety, depression, these are all really, really common for cancer patients, and their families, oftentimes, that are battling cancer right alongside with them in their own ways and having their own experiences at the same time. And so, this is something to really be kind of keeping an eye on for yourself, and perhaps for your loved one who's going through the process as well, if they are so tired and so exhausted from treatment, that they're maybe not able to advocate for themselves to help them find the support systems that they need.

D Dr. Halena Gazelka 10:55

I was just going to ask you, you kind of mentioned partners, but what can intimate partners do to better understand what their partner is going through with cancer treatment? And how can they help?

D Dr. Jennifer Vencill 12:10

Yeah, partners have historically been so overlooked and undervalued, I would argue, when it comes to just kind of patient care in general, but particularly in my field, when we talk about sexual health recovery after cancer. Certainly, sexual health can happen on our own, but oftentimes, it happens within relationships and with partners, of course, and so, you know, just like cancer related distress, that anxiety, that general stress can be buffered with positive partner support. So too, can sexual health concerns be impacted by positive partner and relational dynamics. But it can really go either way, right. So, if those partner and relational dynamics are hostile, if they're negative, if they're unsupportive, that can really take a toll on everything from kind of general mental health to physical well being, and certainly sexual health as well. And so, what's really important here is making sure that we're having the conversations right, both around kind of mental and emotional well-being and then sexual health as well, when that patient feels ready to do that, because again, for many people, the focus is just surviving at first, and of course, it is right.

D Dr. Halena Gazelka 13:18

It is very physical.

D Dr. Jennifer Vencill 13:19

Yes, absolutely. We go into quite literally a stress response, a survivorship mode, and that is okay, right. And so, the sexual health piece of things might not come until later. What I have found is that partners abilities and comfort levels really in discussing sex and sexual health, sexual health education, general attitudes around sex, that really can be really predictive of how well they do here, right. And so, the better able you are to talk openly with your partner

about these topics, which again, we consider culturally very sensitive, most of us are not encouraged or certainly trained in the medical world to talk about sexual health concerns in an open way. This can be really, really tough. And so, it might get to a point where if these are hard conversations to have, for whatever reason, that again, seeking that support from a professional that can help you through it can be really, really enormously helpful.

D Dr. Halena Gazelka 14:17

Well, like you said Jennifer, medical education is a little negligent in teaching about sexual health, interviewing and advising, I think, in many areas. And so, I think just us talking about this today and giving listeners an invitation to ask their provider and to talk to their partner about it and to explore the topic is really helpful. So, thank you.

D Dr. Jennifer Vencill 14:47

You're very welcome. I'm happy to be here.

D Dr. Halena Gazelka 14:50

Do you have any last words of wisdom for our listeners today?

D Dr. Jennifer Vencill 14:54

I think I would go back and reiterate those key words right, patience, exploration, support. What the new sexual normal looks like during and after cancer care could be worlds different than what you expected it to be. But that doesn't always mean bad. So, sometimes when I meet people for the first time there's a grieving process that's happening and understandably so. Again, they've been through a trauma physically, emotionally, sometimes relationally. And through that grieving process we need to recognize the other side might not be a catastrophe. Right, it might not be as bad as we think it's going to be. In fact, for some of the cancer survivors I work with, they're having better sexual health and better sex lives than they did before cancer treatment. So, I think it's important to hear those messages of hope and positivity here because this can be such a hard journey for folks and their partners.

D Dr. Halena Gazelka 15:48

Wonderful. Our thanks to Dr. Jennifer Vencill for being here today to talk to us about sexual health and how it relates to cancer care. I hope that you learned something. I know that I did. And we wish each of you a wonderful day.

N Narrator 16:02

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