

Fact sheet 7

Ovarian cancer and your sexuality

We, Ovacome, are a support network for people affected by ovarian cancer in the UK. We provide information and support, raise awareness and put you in touch with others who are suffering from ovarian cancer.

This fact sheet covers the complicated area of sexuality. Despite being an important part of our being, it is often ignored. Naturally, people focus on the cancer and the treatments to fight it, rather than the whole effect of the disease.

You may find that you are not given the time or space to talk about how having ovarian cancer is affecting your sexuality. You may feel too embarrassed to tell health-care professionals about these worries. Health-care professionals may also not be confident to start up this type of conversation.

Your sexuality is very personal. You are unique in the way you see yourself, how you communicate with others and how others relate to you. This is closely linked to body image and self-esteem. What is important to you may not be an issue or priority to someone else. It is important to feel comfortable and confident with your own needs and desires.

The need for touch, closeness, intimacy and reassurance may be more important than the need or desire for sex. Sex is much more than the sexual act.

You do not stop being sexual just because of having ovarian cancer! Sex in all its forms can be a very valuable therapy to help cope with having treatment for cancer.

However, your sexuality can be affected by finding out you have cancer, the thought of what treatments you have to go through and your worries about the future.

You may at the same time be worrying about loss of fertility, premature menopause, hair loss, weight loss or gain, and pain after surgery. Any of these can change how you feel about sex and how you enjoy it.

Support from partners, friends or family can be valuable and very positive. However, sometimes if the people close to us do not understand what we are feeling, this can add to any negative feelings around sex, leaving us feeling lonely.

Having access to support and information before treatment starts may help you to deal with how you feel about sex and how you see your body from your diagnosis onwards.

This fact sheet will go through some common questions that you may have about the way your sexuality can be affected by ovarian cancer and what you can do about it.

How will the cancer affect my sex life?

Most people experience some difficulty in their sex life at one time or another, particularly at times of change. Having ovarian cancer is a life-changing event, which can affect your sex life in different ways.

Changes can happen from the time of diagnosis onwards. However, your first thoughts and energy may be more concerned with coping with the diagnosis, treatment and getting through it all.

It is later on, when you are ready to start or get back to having a sexual relationship, that you may notice some difficulties.

These may include less desire to have sex, difficulty achieving vaginal intercourse, pain or discomfort during sex and loss of enjoyment. You may experience changes in the way you feel about your body or in how you behave with your partner.

How you respond sexually is a complicated and very individual process, which is influenced by many things. For example, you have to feel like having sex – the mind plays an important part in this!

The physical and psychological effects of your cancer and its treatments can affect how you respond sexually.

A few typical examples are given below.

Physical effects

Changes resulting from having the cancer, surgery, chemotherapy and radiotherapy, include low energy levels, tiredness, feeling sick, diarrhoea, bladder problems, loss of feeling in and around your vagina, early menopause and infertility. These may affect your interest in sex or comfort and enjoyment during sex.

Your vagina may also become dryer, due to the loss of oestrogens (female hormones). This can make having sex difficult and painful. If you have had radiotherapy, you may find that you have reduced space and lubrication in your vagina.

The quality of orgasm you experience may change if you have had a hysterectomy (had

your womb and cervix removed). If you have previously found that some of your pleasure during orgasm centred on your womb contracting, you may get sensation from stimulating your clitoris or vagina, which are not affected after the surgery.

Although radiotherapy is not often used in ovarian cancer, it can cause some specific problems.

Psychological and emotional effects

If the way you see your body changes, you can feel depressed. You may have negative but completely understandable emotions such as anxiety, fear, guilt and a sense of isolation. These emotions can affect how you feel about sex, your body image, attractiveness and sexuality.

You may have worries that you find embarrassing to talk about, and this can also hold you back sexually. If you cannot carry on as before, loss of the 'old you' and uncertainty about the future can all be hard to accept and affect your psychological and sexual wellbeing.

Social effects

Your experience can give you low self-esteem and make you feel less confident to go out which can have an effect on your relationships and your sex life. Today's society places so much emphasis on appearance that it is easy to feel less attractive and less sexy as a result of your cancer and its treatments.

Partners

Partners also sometimes have to adjust. Your partner may need some time to accept what has happened to you and the effect this may or may not have on your relationship. Communication is so important. Being able to talk openly about your feelings can help make things easier.

What can I do about these problems?

General suggestions

A supportive partner, friend or health professional can talk through your problems and help you to see ways of dealing with them. There is no 'set' answer or correct way to change. It often helps to know how other women feel after their cancer treatments, so going to a support group can be a big help.

Many couples find new ways of achieving mutual sexual pleasure by experimenting. For many, it is the overall quality of their physical intimacy and pleasure, rather than the ability to have penetrative sex, that matters.

Of course not everyone has a partner to have sex with, but there is no reason why you cannot continue to pleasure yourself.

Massage, makeovers and relaxation techniques can help put you back in touch with your body and improve your general wellbeing and self-esteem.

We know that getting help such as counselling gives a more successful result than not doing anything about the problem. Counselling at an early stage can also improve your general psychological wellbeing and shorten the time it takes you to go back to work or another activity.

We know that discussing intimate sexual matters can be embarrassing. However, our sexuality is important, so you should talk about any worries you have as soon as you feel ready. You can also have more in-depth psychosexual counselling. Counselling at Relate can be helpful if you are having problems in your relationship.

Specific solutions

Lubricants, for example Sylk, Sensilube and Replens MD, can be helpful if your vagina is

dry. You can also see a menopause specialist for treatment, if necessary.

Who should I ask for help?

- Your gynaecology or oncology nurse specialist
- Your consultant and their medical team
- Your GP

If need more help, you can see a doctor working in psychosexual medicine, a counsellor or a menopause specialist.

Useful information

- Institute of Psychosexual Medicine
Phone: 020 7580 0631
Website: www.ipm.org.uk
- Sexual Dysfunction Association
Phone: 0870 7743571
Website: www.sda.uk.net
- Macmillan Cancerbackup
Freephone 0808 800 1234
Website: www.macmillan.org.uk

If you would like more information or you would like to discuss anything to do with ovarian cancer, phone our support line on 0845 371 0554, Monday to Friday from 9am to 4pm. Or, you can visit our website at www.ovacome.org.uk.

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Reviewed July 2009

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