
HNA Prompt Sheet: Sexual Consequences for Men

Sexual consequences following cancer treatment are common, particularly for those who've been treated with pelvic surgery and radiotherapy, or hormonal treatments. These can include loss of sexual interest/desire, arousal and sexual pain difficulties, orgasmic difficulties and reduced sexual satisfaction/confidence.

In men, these are caused by a variety of physical and psychological factors. For example, erectile dysfunction may result from hormonal changes secondary to treatment, as a result of nerve damage following surgery or radiotherapy, or as a result of changed body image due to weight change associated with treatment. Reduced orgasmic intensity, loss of ejaculation, dry ejaculation and haemospermia are frequently reported as having a negative impact on men's sexual expression following cancer treatment.

Sexual inactivity is not in itself problematic, so long as the person is not dissatisfied, distressed or avoiding sex because of sexual difficulties. If they are, early identification of problems and simple strategies, such as those listed below, may be effective. Onward referral to experts should be utilised when necessary.

Have you considered?

- Providing information (booklets from Macmillan Cancer Support/Prostate Cancer UK) on treatments available for erectile dysfunction (ED) and other sexual difficulties
- Whether other treatment effects (urinary or bowel control difficulties, pain) contributing
- Whether other health conditions (e.g. diabetes, hypertension, cardiovascular disease) contributing
- Whether depression, anxiety self-confidence or body image concerns contributing
- Whether prescribed medications (e.g. antidepressants) are contributing
- Referral to urology, erectile dysfunction, andrology, or fertility service(s) for detailed management
- The role of exercise and lifestyle changes in assisting recovery of sexual function (weight reduction, smoking cessation, alcohol intake reduction)
- Asking whether the man has talked/would like to talk to their treatment team or their GP
- Pelvic floor exercise prescription
- Asking whether the man's partner is affected and signposting to their GP for support

Services which may be able to help

- General Practitioner
- Erectile dysfunction clinics (ED clinics)
- Urology/andrology services
- Psychosexual therapist/counsellor
- Psychological support services
- Pharmacy
- Physiotherapy
- Macmillan information centre
- Prostate Cancer UK (PCUK) telephone helpline service 0800 074 8383
- Sexual Advice Association: <http://www.sda.uk.net/>
- College of Sexual and Relationship Therapists (COSRT): <http://www.cosrt.org.uk/>
- RELATE: <http://www.relate.org.uk/>

- Exercise and lifestyle programmes via the GP, e.g. exercise on referral

Patient information

Macmillan Cancer Support:

<http://www.macmillan.org.uk/GetInvolved/Campaigns/Successstories/SexualRelationships/SexAndCancer.aspx>

<http://www.macmillan.org.uk/Cancerinformation/Livingwithandaftercancer/Relationshipscommunication/Sexuality/Sexuality.aspx>

Cancer Research UK: <http://www.cancerresearchuk.org/about-cancer/coping-with-cancer/coping-physically/sex-sexuality-and-cancer/how-cancer-can-affect-your-sexuality-and-sex-life>

Prostate Cancer UK: <http://prostatecanceruk.org/search-results?q=Sexual+Dysfunction>

Shine Cancer Support: <http://www.shinecancersupport.org/programmes/podcast-listen>

American Cancer Society:

<http://www.cancer.org/treatment/treatmentsandsideeffects/physicalsideeffects/sexualsideeffectsinsen/sexualityfortheman/sexuality-for-the-man-with-cancer-toc>

Want to know more?

Prostate Cancer UK: <http://prostatecanceruk.org/for-health-professionals/online-learning/courses-and-modules?q=Sexual+Difficulties&category=&type>

American Cancer Society: <https://www.cancer.gov/about-cancer/treatment/side-effects/hot-flashes-hp-pdq>