

Dr. June LaValleur

A nationally recognized doctor, June was involved with groundbreaking research on how to manage women with menopause. Recognizing the importance of sexual health as a vital component in emotional, physical and spiritual health, she taught medical students and OB-GYN students how to teach their own patients about sexual health issues. Now retired, June volunteers with a number of groups and continues to speak about women's health issues.



What Happened? I Just Want Things to Be Like They Used to Be: Part II

June La Valleur, MD, FACOG, AASECT
Certified Sexual Health Counselor
2020 BCEA Annual Conference
October 3, 2020

Industry Relationships

- I have no conflicts of interest.
- I have no relationships with any industry.
- I may mention products, not as recommendations, only as information.

Topics

- Sexual function and dysfunction as it relates to breast cancer survivorship
- How to manage sexual dysfunctions caused by reactions to treatment for breast cancer
- Facts about breast cancer
- Information sources
- A few words about male breast cancer

We Are All Unique In Our Response to Diagnosis and Treatment of Breast Cancer

- Previous sexual experiences
- Our general health
- Our emotional health
- Our expectations
- Our quality of life (QOL)

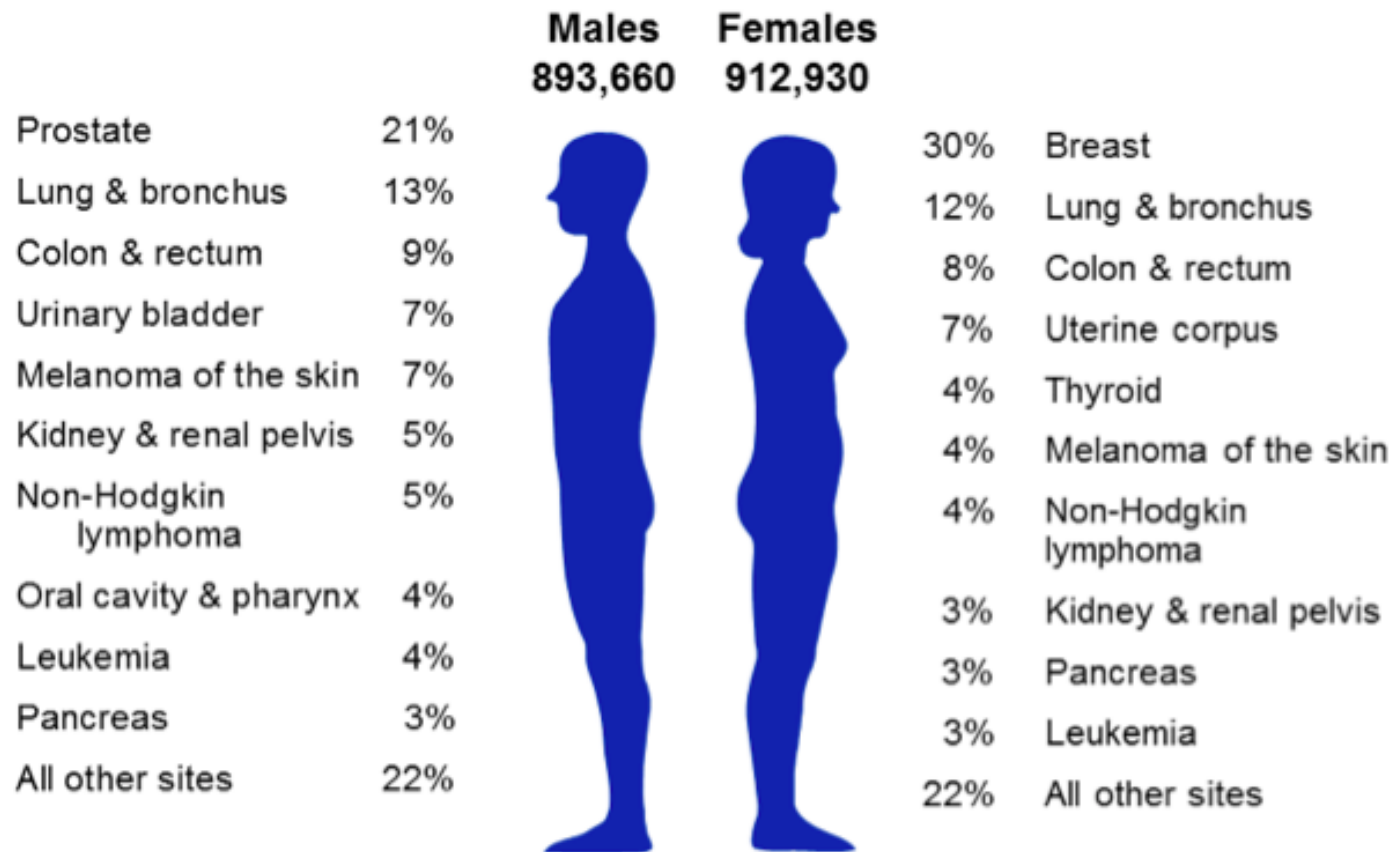
Poll #1: Why Women Have Sex

- To be intimate
- For pleasure
- To gain control
- To manipulate him/her
- I don't want to lose him/her
- To feel good about myself
- I was forced to
- To get pregnant
- A sense of duty
- Other

*Cindy Matson, PhD, and
Anne Philpott*

2020 New Cancer Cases

Estimated New Cancer Cases* in the US in 2020



*Excludes basal cell and squamous cell skin cancers and in situ carcinoma except urinary bladder.

GOOD NEWS

- Risk of dying from breast cancer markedly reduced last 20 years.
- PROBLEM: Recent data show routine breast cancer screening down 90% past year.
- Survival: 97% 1 yr, 94% 2 yrs, 5 yrs 87%

What Affects Female Sexual Health?

- COMMUNICATION, COMMUNICATION, COMMUNICATION
- Relationships
- Mental and Physical Health
- Brain Hormones
- Cultural and Religious Backgrounds
- Hormones
- Fatigue

Estrogen and Progestin Therapy Influence on Breast Cancer (BC)

- Continues to be controversial
- Women's Health Initiative early 1990's
- One arm estrogen (E) (Premarin) and Medroxy Progesterone Acetate (P) (Provera)
- One arm estrogen alone.
- 20 year follow up:
- E + P: Higher BC incidence, no diff. mortality
- E alone: lower BC incidence and mortality

JAMA 7/28/2020

How Do Treatments Affect Sexual Function: Short Term, Long Term?

- Surgery: (many types), scarring, lymph-edema, pain, body image, if genetic may include hysterectomy, oophorectomy
- Chemotherapy: N and V, chemo brain, interrupts psychological equilibrium, low desire (libido), mucositis, fatigue, neuropathy, diminished cognitive ability
- Radiation: skin reactions, pain, body image

Effect of Long Term Anti-Estrogens

- Tamoxifen, aromatase inhibitors (AI's),
- All those menopausal symptoms, HF's, NS's, dry vulva and vagina, skin changes

Whatever happened to our sexual relations?

I don't know. I don't even think we got a Christmas card from them this year.



Possible Sexual Dysfunction After Breast Cancer Treatment

- 35-50% of patients experience at least one sexual dysfunction
- 7-22% of couples separate
- Difficulty with orgasm
- Loss of interest in sex (low libido)
- Pain with penetration/touch
- Desire discrepancy (not a dysfunction)

Reisman & Gianotten 2017

Poll #2: What is Your Definition of Sexual Health?

Check all that apply

- I can have an orgasm
- I don't have any STI's
- There isn't any pain
- I am not forced/coerced into having sex
- I can have pleasure and enjoy sex
- I can choose my sexual partner
- Other

WHO Definition of Sexual Health

- “..a state of physical, emotional and social well-being in relation to sexuality; not merely the absence of disease, dysfunction and infirmity....requires positive and respectful approach to sexuality and sexual relationships,.....having pleasurable and safe sexual experiences, free of coercion, discrimination, discrimination and violence.....”

Poll #3: What were your first thoughts when your practitioner said, “You have breast cancer”? *Check all that apply*

- Oh my god, my children are so young.
- Am I going to die from this?
- Do they have to take my breast off?
- I am the sole earner in my family, how can I take time for treatment?
- What will husband/partner/fiance’ think?
- Will I be able to continue my career?
- Other

Psychological Issues Possible After Diagnosis and Treatment

- Anxiety, anger, depression, irritability
- Very distressing life event
- A threat to intimacy
- Personal mortality/vulnerability
- Difficult to re-establish intimacy with partner or new partner

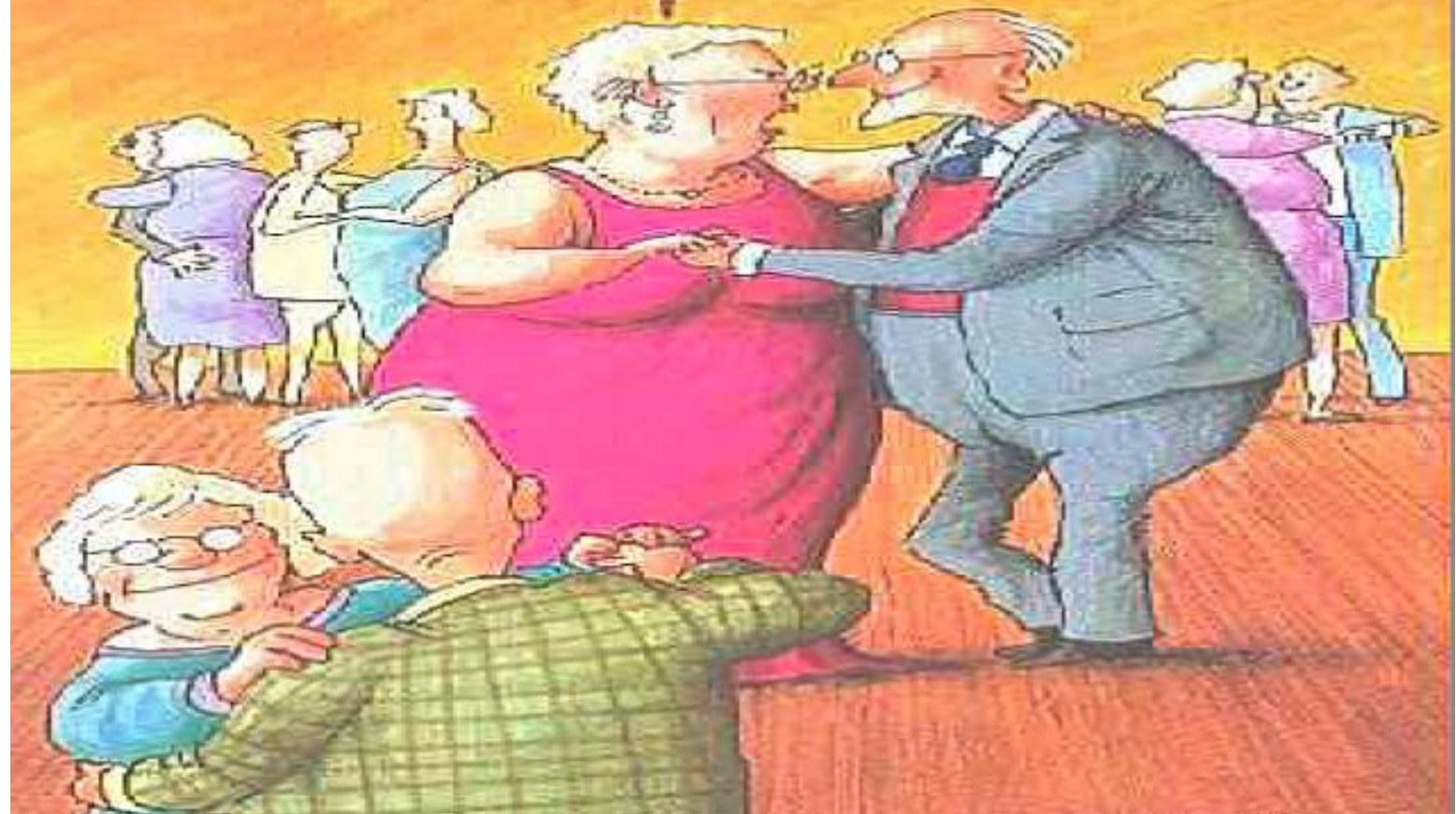
Keep the Flame Alive

- Massage
- Creating encounters (making a date)
- Working with partner
- Continue cuddling, kissing, caressing

Treatment for Painful Sex

- Moisturizers
- Lubricants
- Possible local estrogen eg. tablet, ring, creams
- Local DHEA (dihydroepiandrosterone)
- Laser

**NO... NO...
I SAID I'VE GOT
ACUTE ANGINA**



FDA Approved Treatment for Low Desire

- Flibanserin
- Expensive (\$800/month)
- Not studied yet in women with breast cancer

Possible Effects of Breast Cancer on Partner

- Initially, sex irrelevant. Both concerned about survival
- Partner may have/develop sexual dysfunction
- Partner afraid to hurt you
- Partner may be turned off by absent breast(s)
- In late diagnosis, partner's role may change to that of caregiver

Male Breast Cancer

- Male lifetime risk 1/1000
- Less than 1% of all breast cancers are in men
- More than 90% of their cancers hormone +
- Treatment leads to hot flashes, mood disturbances, weight gain, diminished sexual function
- A “female” disease may lead to disturbed male identity.

Getting Professional Help if Sexual Dysfunction Occurs in You/Partner

- DON'T WAIT
- If problem has persisted for 6 months, get help
- Seek professional help of sexual health counselors/therapists (AASECT) or others with experience in these issues
- Many physicians (including oncologists) not experienced and don't ask. **YOU NEED TO ASK!!**



OMG !

PSYCHO
THE
RAPIST

PSYCHOTHERAPIST
IS ONE WORD!
ONE WORD !!!

Quality of Life (QOL)

- Sexual Health improves QOL
- Some studies show a prolongation of life