Meeting of the Waters – 22/7/2017

When cancer joins you in the bedroom.............sexuality and intimacy

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Why?

- Required by the men and partners
- No service in the region
- Limited resources
- Limited skill/knowledge of cancer impact
- Embarrassed
• Sexual Health & Cancer – male & female
• Canadian course – CAD $349
• 7 week online course – 0400hrs!!!
• Online discussion – PLISSIT model
• 2 reflective pieces
• Weekly discussion forum
PLISSIT model

- Permission – obtained by practitioner to discuss sensitive issues
- Limited Information - provided to the patient
- Specific Suggestions are made as trust develops
- Intensive Therapy – referral to specialist – psychologist, sexual therapist
When cancer joins you in the bedroom

• 90 minute session

• Advertised through Wellness Centre in cancer centre

• Referral from MDT

• Encourage partners to attend
Going home to an empty bed isn't what I want. I want to curl up next to you and feel your warmth besides me.

-me
“Sexuality is a central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction.”

(WHO, 2002)
Sexuality is more than just sex

It’s the essence of who we are, how we relate to others, and how we think, feel, act and express ourselves emotionally, physically and spirituality. It is shaped by the social, political, religious, economic, and cultural climate in which we live.
Sex is something you do. Sexuality is something you are.

—— Anna Freud ——
## Sexual response cycle

<table>
<thead>
<tr>
<th>Stage</th>
<th>Response</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desire</td>
<td>Swelling</td>
<td>Visual stimuli</td>
<td>Touch /Verbal stimuli</td>
</tr>
<tr>
<td>Arousal</td>
<td>Vasocongestion</td>
<td>Erection</td>
<td>Lubrication</td>
</tr>
<tr>
<td></td>
<td>Increased breathing &amp; heart rate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plateau</td>
<td>Spasms, muscle tension</td>
<td>Full erection</td>
<td>Full vasocongestion</td>
</tr>
<tr>
<td>Orgasm</td>
<td>Heightened pleasure, release sexual tension</td>
<td>Ejaculation</td>
<td>Contraction of lower uterus</td>
</tr>
<tr>
<td>Resolution</td>
<td>Body returns to pre orgasmic state</td>
<td>Loss of erection</td>
<td>Loss of congestion</td>
</tr>
</tbody>
</table>
The Male Sexual Response Cycle

**RESTING**
- Testicles descended
- Scrotum thin
- Unstimulated state

**EXCITEMENT**
- Full erection
- Partially stimulated state
- Partial elevation of testes
- Unstimulated state

**ORGASMIC**
- Penile contractions
- Internal sphincter of bladder closes
- Urethral contractions
- Contractions force the seminal fluid through the urethra
- Seminal vesicles contract
- Rectal sphincter contracts
- Prostate gland contracts
- Marked increase in size of testes

**PLATEAU**
- Cowper's gland secretes
- Color deepens
- Testes fully elevated
- Cowper's gland becomes active
- Prostate enlarges
What cancer can do!

• Disrupt the desire and arousal phase
• Erectile dysfunction, lack of libido
• Reduce size of penis
• Fatigue
• Dry ejaculations
• Negative effect on body image and sexual perception
Benefits of sexuality with cancer

- Sexuality and intimacy can lessen emotional distress
- Improve psychosocial adjustment in the face of cancer
- Physical pleasure can relieve stress
- Pleasure can be life affirming in the face of cancer
- Nourish relationships

(Park, Norris, Bober 2009)
Treatments

Dependent on the objective

• Penetrative sex
• Orgasm
• Masturbation
• Body image
• Intimacy
‘Real sex’ (normal sex) is often defined as penis vagina intercourse.

Even when sex is acknowledged to be more than just intercourse involving activities such as oral sex or mutual masturbation, coital penetration is positioned as the inevitable outcome.

Renegotiating sex and intimacy after cancer: resisting the coital imperative.

Ussher. JM Perz, J Gilbert, E Wong WK Hobbs K (2012)
The penis is like the sun and when the sun is out its hard to see the moon and the stars
Embracing intimacy and building trust

- Cuddling
- Kissing
- Nongenital touching
- Massage
- Spending time together
- Caring
- Talking
IT'S NOT ALWAYS ABOUT SEX, SOMETIMES THE BEST TYPE OF INTIMACY IS WHERE YOU JUST LAY BACK, LAUGH TOGETHER AT THE STUPIDEST THINGS, HOLD EACH OTHER, AND ENJOY EACH OTHER'S COMPANY.
Treatments

- Take after light meal
- Need stimulation
- Try several times with self
- Need some erectile function to work
- Not an option if cardiac issues
Treatments

Vacuum device

- pump
- cylinder
- constrictive ring

- PENIS
- COCK RING
- SCROTUM
Treatments

Sex toys
Treatments

Intracavernosal injections

Vasoactive substance is injected into the corpus cavernosum.

Dorsolateral location of injection site.
Penile prosthesis
- Feel like a failure
- Partner will leave me
- No longer feel like a man
- Feel depressed
- Is this normal?
- I feel guilty for thinking about sex and I should be grateful I’m alive
• Men don’t talk
  - Older people don’t have sex
  - Can’t have an orgasm without an erection
  - Communication isn’t affected by lack of intimacy
  - Sex is finished when erectile dysfunction occurs
What nurses can do

Nurses can help cancer survivors adjust to sexual changes by

• initiating a discussion of sexuality at the time of diagnosis and throughout the trajectory of disease

• know where to refer men to for management

• discuss treatment goals – what do they want?

• link into support groups
The conversation between your fingers and someone else's skin. This is the most important discussion you can ever have.

~ Iain Thomas
• Renegotiating sex and intimacy after cancer: resisting the coital imperative. *Ussher, JM. Perz, J. Gilbert, E. Wong, WK. Hobbs, K.* (2012)

• Sexual health communication during cancer care: barriers and recommendations *Park, ER. Norris, RL. Bober, SL.* (2009)