



Ovarian cancer, sex and intimacy

A diagnosis of ovarian cancer and the resulting treatment can cause emotional and physical difficulties which can impact on your sexuality, sex life and relationships. This booklet discusses what physical and emotional issues you may face and how you can seek help and support.

What impact can an ovarian cancer diagnosis have on sex and intimacy?

Emotionally, some women may find they have an increased need for closeness. Others may withdraw. Some women feel unhappy or frightened about being sexual and, for others, being sexual again after treatment is a sign that life is getting back to normal. However you feel, it's important to find the right balance for you.

Physically, for some women, ovarian cancer treatment can cause changes which make sex more difficult. These include increased tiredness or fatigue, pain and vaginal dryness. These can cause you to withdraw from sex, or for your partner to worry they are hurting you - but there is treatment and help available.

Is how I am feeling normal?

It is normal for a woman's wants or needs for sex and intimacy to vary throughout her life and it is normal to want, or not want, to be sexually intimate. This may include kissing, cuddling, fondling or being sexual with a partner or on your own. How you feel sexually may or may not have changed because of your diagnosis and/or treatment. How you are feeling is normal for you.

You may not even be thinking about sex if you've just received your diagnosis. It may also take a while before you are ready to resume your sex life if you have had major surgery or are experiencing side effects of other treatments. For example, if you are feeling sick due to chemotherapy, kissing someone will probably be the last thing on your mind.

Most women will experience some short-term physical, treatment-induced changes, although some women will have longer-term effects. These feelings may be unexpected or not quite as simple to understand. For some women, having sex during this time can help them feel cared for, loved and secure. Your response will be very personal.

If your feelings and experiences are causing you concern you may be feeling unsure of where to seek help or embarrassed to talk about them. You're not alone. Many women in your situation experience similar feelings and help is available.

I want to have sex but I'm finding it difficult. What can I do?

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Sex can be difficult for many different physical and psychological reasons. When sex is difficult it's common to withdraw from your partner to avoid sex and in turn avoid intimacy - but this can make the problems worse. Try to talk to your partner, to explain how you are feeling and what difficulties you are experiencing.



Problems with desire, arousal and orgasm are all more common than you may think. The organisations listed at the end of this booklet offer some good tips and advice for dealing with all sorts of sexual problems. If you feel you would benefit from some further support on any of these issues you may also want to consider talking to a professional who deals with sexual problems, such as a psychosexual therapist. If you feel able, you should talk to your GP or Clinical Nurse Specialist (CNS) to ask for information and advice about what help is available locally to you.

I want to have sex but it is painful.

What can I do?

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Pain during and after intercourse may be emotional, associated with desire and arousal, but is often physical, due to vaginal dryness and/or not enough lubrication. Sometimes simple changes can help.

- If you have a dry vagina due to hormonal changes, it may be helpful to regularly use a vaginally-applied oestrogen or a non-hormonal vaginal moisturiser. These options may not be suitable for all women so speak to your CNS about what is appropriate for you.
- If you find that you are not fully aroused during foreplay and intercourse, using lubrication can help. (See **Can you tell me more about lubrication?** below).
- Learning to relax your abdominal and pelvic floor muscles during penetration can also help – a bit like a reverse pelvic floor exercise!
- It is also worth trying out different positions to find one more comfortable. Take your time to find out what works for you.

Physical contact with a partner will release certain chemicals in your brain and make you feel better, so whether it's a cuddle, a kiss or more sexual contact that you want, it may help you to combat the stress you are trying to cope with.

Can you tell me more about lubrication?

The right type and amount of lubrication can help to reduce pain during sexual intercourse or when using sex toys. There are many different types of lubricants which can be bought in most supermarkets, chemists or online. Some are also available on prescription.

- **Water based lubricants** are the most common type. They often need to be reapplied regularly but are safe to use with all latex and silicone products including condoms.
- **Silicone lubricants** last longer than water based lubricants and can be used with latex condoms but not with other silicone products such as sex toys.
- **Oil based lubricants** again last longer than water based lubricants but they are not considered safe for use with latex products (eg condoms) or rubber sex toys.

Sometimes it helps to combine using oil and water based lubricants (oil first) to help reduce friction during penetration. Try to incorporate using lubrication into foreplay, making it part of your sexual routine.

Irrespective of whether you are sexually active it can be helpful to regularly use a non-hormonal vaginal moisturiser (ie Hyalofemme, Replens, Regelle, YES VM etc.) to help improve vaginal dryness and other vaginal symptoms associated with your treatment.

I don't want to have sex. What can I do?

It's OK to not want to have sex. Many sexually inactive women are not dissatisfied, distressed or avoiding sex because of sexual difficulties. Even if you are usually sexually active it's normal to go off sex at times.

However, if it is causing difficulties in your relationship or you feel you would like to change things, there are lots of other ways to find sexual satisfaction which don't include penetration and these can be very pleasurable and rewarding. It's not essential to have sexual intimacy to feel closeness to a partner and you may prefer to spend time relaxing in and enjoying your partner's company. If you are feeling this way, be open and honest with your partner. Talking to each other can deepen your relationship and have a positive effect on intimacy. For instance, you may decide to avoid penetrative sex for a while but concentrate on kissing, cuddling and other types of non-penetrative sexual pleasuring.

Your physical responses in sexual situations can also be affected by how you feel about yourself. Sexuality is not just about intercourse or masturbation: it is an important aspect of body image and your desire for and enjoyment of sexual situations is dependent on your general well-being and self-esteem.

Be kind: looking after yourself can help build up self-image. If you are struggling with difficult feelings it might be helpful to talk to your partner, friends or CNS about these.

My partner is worried about having sex. What can I do?

Communication with your partner is important. Discussing your worries and fears, or what hurts during sex, will help you both feel more relaxed to work out a solution.

You or your partner may experience low desire due to the range of emotions you are both dealing with in order to come to terms with your diagnosis. You may have to reassure your partner that you want to have sex or touch each other intimately and allow them time to help you understand their needs too. Sex, for some, can help us feel connected to our partner and give us a boost of pleasure so, if it's something you feel you want, it is worth having a go.

Is it safe to have sex during chemotherapy?

If you are having sex during chemotherapy it is advisable to use barrier contraceptives (eg condoms or femidoms) to reduce the possibility of passing breakdown products from the drugs on to your partner. We don't know for sure whether drugs can be passed on through vaginal secretions so this guidance is there as a precaution. You may prefer to avoid intercourse for approximately 48 hours after chemotherapy to reduce any potential theoretical exposure to breakdown products as the drugs are excreted from your system.



Is it OK to continue with masturbation?

We can make ourselves feel good by touching our bodies and giving pleasure to ourselves. There is nothing wrong with this at any time of life and when you have had a cancer diagnosis, it may help you cope.

Masturbation may also help you feel a greater ownership of your body. After having had doctors examining you, touching yourself may be comforting and help you reconnect with yourself.

My ovarian cancer treatment led to early menopause. Is there specific advice for me?

The sudden loss of testosterone (a hormone produced by men and women) after surgical menopause can lead to changes in your sex drive, and changes in your oestrogen levels can cause vaginal dryness and painful sex. This is very common and there are lots of things that can help (see **I want to have sex but it is painful. What can I do?** above.) Due to hormonal changes you may also feel differently about being sexual after the menopause and your arousal and orgasm may not be the same as before. Some centres hold menopause clinics to address these needs, offering diagnostic and therapeutic options. Ask your CNS about these.

If you found this booklet useful, visit our website for more information and our full range of ovarian cancer guides
targetovariancancer.org.uk

“Sex had changed. As a post-menopausal woman you don’t create the same secretions and I have a lot of difficulty with vaginal dryness. It was very difficult, especially in the early stages post cancer, discussing things like lubrication but now I think I have a more active enjoyment of sex as a post-menopausal woman than I did before my cancer.”

Nicola

I’m not in a relationship and am scared of starting a new one.

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It’s understandable to worry about how to start a new relationship, particularly if your treatment means that your feelings about sex and intimacy have changed. A question frequently asked is, ‘When do I tell my new partner that I have had ovarian cancer?’ There is no right or wrong answer. It is likely that you will know when the time is right. Building a relationship on trust and honesty will strengthen it.



Where can I get further support?

For many people, talking about sex can be a sensitive issue but it helps to talk. Your CNS or GP will be happy to speak to you about any concerns that you may have. It may be that you can solve a problem by talking to a sex therapist or psychosexual counsellor (this is usually a psychologist who is specially trained).

There should be a sex therapist available to you in your local area through the NHS and you can ask for a referral if you think this would be helpful. Psychosexual counselling is available through Relate (details below) and in some areas of the country via GPs. Or traditional counselling may be best. Don't be shy about talking to a professional, they will want to help you with this aspect of your recovery.

Where can I find out more?

- Target Ovarian Cancer's nurse-led Support Line offers confidential information, support and signposting for anyone affected by ovarian cancer. You can call us on **020 7923 5475** (Monday – Friday from 9am to 5.30pm) or visit **targetovariancancer.org.uk/supportline**.
- Our guides for women with ovarian cancer offer expert advice, practical information and emotional support on a wide range of issues at all stages. Order copies at **targetovariancancer.org.uk/guides** or by calling **020 7923 5475**.
- We also have comprehensive listings of other sources of support on our website – **targetovariancancer.org.uk/support**
- The College of Sexual and Relationship Therapists (COSRT) is the UK's leading organisation for therapists specialising in sexual and relationship issues. Their website can also be used to help you find a therapist in private or NHS services in your local area – **cosrt.org.uk** or **020 8543 2707**.

- Relate provides supports for all kinds of relationships and offers online help with sex and relationships including a Live Chat option – **relate.org.uk** or **0300 100 1234**.
- The Sexual Advice Association offers online resources to improve sexual health and wellbeing – **sexualadviceassociation.co.uk**
- The Institute of Psychosexual Medicine (IPM) provides education, training and research in psychosexual medicine and can help you find a specialist– **ipm.org.uk** or **020 7580 0631**.



Find out more

Get in touch for more information, support and signposting for anyone affected by ovarian cancer. Why not register with us to be the first to receive news about our information and events?



Support Line: 020 7923 5475



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