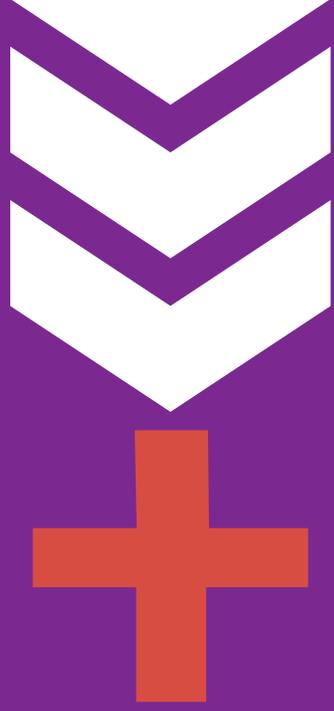




SEXUAL HEALTH

Comprehensive Fertility and Sexual Health Program

QUESTIONS & ANSWERS



Cancer treatment may affect many parts of your life, including sexual health. Sexual health includes how you feel about yourself, your sexual orientation, your identified gender, wanting to feel close to others, wanting to have sex, and how your body responds to sex. Sexual activity includes intercourse, masturbation, and vaginal, oral, and anal sex.

This handout covers some common questions about sexual health and cancer, including how to prevent infections, how to keep your partner safe, and how to prevent pregnancy. It should not replace talking to your “care” team about any sexual health questions or concerns.

It is important to talk to your care team if you are having intimate sexual contact with anyone so that you may know how best to keep yourself and your partner safe.

All conversations with your care team about sexual health, including pregnancy, birth control, and sexually transmitted infections, will be **confidential**. This means that this information will not be shared with your parents/guardians.



Understanding your risk

Chemotherapy Exposure

During treatment, it is possible for a small amount of chemotherapy or other medications to pass into the fluid inside the vagina or into semen. It is best to wait at least 72 hours after chemotherapy before having sex to protect your partner from exposure. We also recommend always using a barrier method, such as a condom, for additional protection.

Birth Control and Pregnancy

While some types of cancer can affect fertility, it is still possible for a female patient to get pregnant or for a male patient to get a female partner pregnant during treatment.

Chemotherapy and radiation may cause birth defects if you or your partner gets pregnant during treatment.

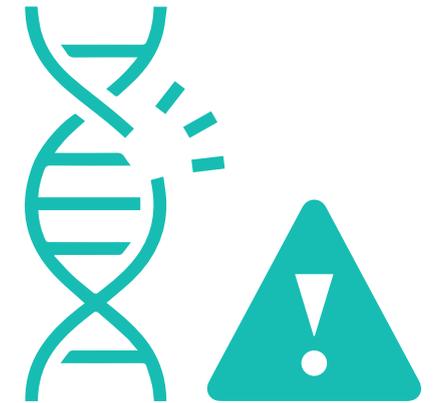
Use a condom and one other form of birth control to prevent pregnancy during treatment.

Talk to your treatment team if you need help getting birth control or have questions about what types of birth control might be best for you.

Sexual Arousal

It is normal to have changes in the way you feel about relationships during cancer therapy. Fatigue and physical changes (such as hair loss, scars, weight changes), may affect your interest in having sex.

If you are less interested in having sex or having difficulty getting aroused, talk with your care team – there may be things we can do to help.



Infection and Bleeding

When you have cancer or are undergoing treatment, your white blood cells (WBCs), red blood cells, and platelets may be low.

When your WBCs are very low, you are at high risk for infections. Your absolute neutrophil count (ANC) is a measure of WBCs and important to pay attention to when considering your risk for infection.

When your platelets are low, you are at increased risk for serious bleeding

Cold sores and genital warts/lesions are infections. Coming into contact with someone who has cold sores, genital sores, or warts places you at risk for getting these infections.

Refer to the following chart for guidelines of safer sexual activity based on your ANC and platelets.

ACTIVITY	ANC	PLATELET COUNT	THINGS TO CONSIDER
Kissing	No requirements	No requirements	If you have mouth sores from your chemo or infection, wait until the sores heal. This is because kissing could give you an infection and make your mouth sores worse.
Non-genital touching	No requirements	No requirements	
Genital to genital touching	No requirements	No requirements	Use barrier protection even if there isn't vaginal or anal penetration.
Oral sex	No requirements	No requirements	
Masturbation	No requirements	No requirements	If masturbation involves vaginal or anal penetration, please refer to below.
Vaginal penetration	>500	>20,000	*Use a condom AND one other form of birth control if you are having penile-vaginal penetration. *Consider using a lubricant that is made to be used with condoms (Vaseline and some lotions can break down condoms)
Anal penetration	>1,000	>50,000	Use a condom. *Consider using a lubricant that is made to be used with condoms (Vaseline and some lotions can break down condoms). *The risk of bleeding is less if you are the insertive partner and not the receptive partner.

Birth Control

There are many different types of birth control for patients with a uterus (pills, patch, injections, implanted devices including intrauterine devices, etc.). Here are a few things that you and your care team should consider when choosing the best birth control for you:

Estrogen Risk

Birth control that contains the hormone estrogen can increase your risk for blood clots. Because of this, it is generally advised to not use estrogen-containing forms of birth control during treatment and for up to 6 months after you finish treatment.

Non-Effective Means

Lupron (leuprolide), a medication that is often used to suppress menstruation/period bleeding during treatment, is NOT an effective means of birth control.

IUD

An intrauterine device (IUD) is often safe to keep in place during many different types of cancer treatment

Emergency Contraception

Emergency contraception (aka "the morning after pill") is safe to use if needed (but should not replace a regular birth control strategy).

It is important to talk to your care team about which type of birth control may work best for you and/or your partner while going through cancer therapy. They will help you decide the most effective and safest choice. Remember, birth control does NOT protect against sexually transmitted infections (STIs). Condoms provide the best protection and should be used in addition to birth control.

Additional things to know:



Sex toys should be washed with hot and soapy water with every use. Patients should not share sex toys.



Symptoms of a yeast infection includes vaginal discharge and itching or itching and irritation under the foreskin of the penis. Let your doctor know immediately if you have any of these symptoms.



There is an increased likelihood for yeast infections during many cancer treatments and/or by treatment with steroids or antibiotics.



Avoid sex if a partner may have a sexually transmitted infection.

Q&A

Common Questions

Q: Can I still have sex during treatment?

A: Yes, but there are several important things for you to know. Chemotherapy may be present in your vaginal fluid or semen. It is best to wait 72 hours after chemotherapy to have sex. You should also always use a barrier method, like condoms. Sometimes your blood counts may put you at risk for complications from sex. The chart inside of this pamphlet has more details.

Q: Can I get my partner sick if we have sex?

A: Fortunately, cancer is not contagious, which means that your partner cannot catch it from being in close contact and through doing things such as touching, kissing, hugging, or sex. However, there are sexually transmitted infections (STIs) that can be spread through having sex. These infections can be very dangerous so you should always use a barrier method, such as condoms, to keep you safe. Discuss testing for STIs with your partner if you have concerns.

Q: Is birth control safe during treatment?

A: It depends on the type of cancer, treatment, and birth control. Talk to your oncology care team to decide what is best for you. Remember, you should still use a barrier method, such as condoms, to protect yourself from STIs.

Keep in mind that while you may feel too tired or uncomfortable for sexual activity and/or there may be times when it is not medically safe, there are other ways to be close to someone.

These include touching, cuddling, holding, kissing, and spending time with your partner.

Q: If I have a central line, g-tube or other implanted device, can I still be intimate with another person?

A: Yes, you can still be intimate with another person despite any devices. However, you must still take care of these devices as you were taught. Talk to your oncology care team if you have questions.

Q: Why does my doctor need to know about my sex life?

A: Sexuality is a very important and normal part of life for an adolescent or young adult (AYA). Your care team's job is to keep you as healthy as possible during treatment as well as to provide you with information about any risks to your health, including risks to your sexual health. Whether or not you are having sex, it is important for you to be able to talk to your care team about any questions or concerns you may have about your sexual health.

Additional Resources



Elephants and Tea

Their mission is to help adolescent and young adult patients, survivors, and caregivers know they are not alone in their fight with cancer by providing opportunities for connection. On their website, they have a section dedicated to sexuality, which includes patient stories.

www.Elephantsandtea.com



Stupid Cancer

Empowers and connects young adults with cancer. They have a section under the "Resources" tab dedicated to Sex and Relationships.

www.l2y.org

www.connecticutchildrens.org/aya



www.connecticutchildrens.org/aya