

Haematology and transplant unit

Sexual health following blood stem cell transplantation for female patients

Introduction

Haemopoetic stem cell or bone marrow transplant (HSCT) can affect sexual health and intimacy for both male and female transplant patients. However, this information leaflet is for female patients.

Sexual health can be affected in many different ways by having an HSCT. The management of the concerns can often be simple but people may feel embarrassed about discussing such issues with health care professionals and so they may remain unresolved. The aim of this leaflet is to help you see that you are not alone with your concerns and to give you the confidence to discuss them with your doctor or nurse who will try to help with any symptoms you may be experiencing. If your concern is not mentioned in this leaflet, don't worry. The issues addressed below are some of the common issues women have identified but it is not meant to be an exhaustive list. It is important you mention anything you are unsure about to one of the doctors or nurses looking after you.

Some general points

It is not dangerous to be sexually active whilst receiving treatment. It is important to remember that the need for tenderness is not affected by treatment, and that cuddling and stroking, even gentle massage can be used to advantage if platelet levels are not too low.

- Cancer is not contagious – not even during intercourse. A cancer cell cannot survive in another person's body.
- Radiation cannot be transferred to your partner.
- Care should be taken with intercourse while platelet levels are low due to the risk of bleeding.
- Cuddling and stroking is always allowed as long as your partner is free from infection and maintaining your relationship through kisses, hugs and compliments even during those periods when sexual desire and stamina are low is a good idea.
- Tell your partner what you like and don't like. Listen to your partner to what he/she likes or dislikes.
- Try different sexual positions so that it is comfortable for you and your partner. Use pillows.
- Contraception is recommended during the treatment period since the possibility of becoming pregnant cannot be ruled out.
- Irregularities in the menstrual cycle are normal – even early menopause can occur after treatment.

Issues you may encounter

• Poor body image

Decreased appetite, dry, flaky skin and hair loss can influence self-image and contribute to sexuality being neglected. However, nurturing yourself (for example, through regular moisturising) and allowing your partner to nurture you also, can help combat such feelings.



- **Fatigue**

Some women feel very tired and lethargic following cancer treatment and do not feel like having intercourse. Some relationships can suffer because of this but where possible discuss this with your partner, and find other ways to feel close until things improve. If necessary we can refer you for counselling.

- **Loss of libido**

During a serious illness, a person's sex drive can reduce or even disappear for a period of time. This can be due to single factors such as tiredness or the emotional stress of the situation. However, it is more commonly due to a combination of things which can include alteration in hormone levels following chemotherapy. Sometimes it will resolve itself (for example if hormone treatment is given) but as with tiredness, let your partner know – that way they will not think it is 'their fault'. Once again, counselling can be arranged if you feel it would be helpful either for you alone or as a couple. It is important to remember however, that sexual intimacy is much more than just intercourse and orgasms.

- **Infertility**

After a stem cell transplant the risk for hormonal imbalance and infertility is extremely high, especially if the conditioning regimen includes total body irradiation. It is possible to check if you are still fertile after treatment. A blood test is taken to check hormone levels. However no test can one hundred percent guarantee that complete infertility exists, just how great the possibility is for reproduction. Becoming pregnant is not advised during treatment due to the risk of harm to the foetus, or for up to 2 years afterwards since the body needs to be healthy again.

- **Vaginal dryness**

The physical problems that you may encounter vary between individuals. Many women may experience some mild vaginal dryness and vaginal lubricants such as YES, Sylk or Replens may help. Occasionally, however, if it turns out to be due to specific factors, further treatment may be needed such as hormone replacement or steroids which would need to be discussed with you and the medical team.

- **Vaginal bleeding**

If you were menstruating before the HSCT, it is possible that your cycle may return once your treatment has finished. Tell your doctor or nurse about this as they may need to stop your menstrual cycle until they are happy your blood count is stable. Bleeding can also occur due to damage of the vaginal membrane. Once again it is important to let the team know so that they can assess the cause of the bleeding and give you appropriate advice and medication if necessary.

- **Vaginal atrophy**

Some women feel that as well as the vaginal membrane becoming dry and fragile, their vagina has 'shrunk'. Sex can be very sore, painful and in some cases you may have bleeding. Again lubrication can help along with vaginal dilators to stretch the vaginal membrane. Vaginal dilators come in 4 sizes ranging from finger size to the size of the penis. Sometimes finger massage around the vaginal area can help with blood flow and the stretching of the area. In some cases, hormone cream might be helpful and can be used to perform the massage and aid with the insertion of the dilators. If you are suffering with pain during sex or have pain when passing urine, speak to your doctor or nurse for advice and guidance as additional therapy can sometimes be necessary.

- **Infection**

Care should be taken following transplant to prevent infection and maintain a good standard of hygiene. Tightly fitting underpants, G-strings or synthetic material are better avoided if possible as they reduce 'breathability' to the area and limit your own 'good' bacteria from inhibiting the unwanted bacteria. If you have sexual intercourse, we strongly advise you to use a condom for 6 months following a transplant. Symptoms of infection often include some or all of the following: soreness, irritation or pain on passing urine, blisters, unusual or unexpected discharge which may or may not have a smell. If you experience any of these symptoms, speak to your clinical team as you may need anti-microbial medication.

- **Vulvo-vaginal Graft versus Host Disease (vGvHD)**

vGvHD can occur following an HSCT using cells from a donor other than yourself (allograft) and (much more rarely) when you provide the cells yourself (autograft). The symptoms of vGvHD range from being symptom-free (especially if you do not have a sexual partner), to symptoms similar to those described for vaginal atrophy and infection above. In severe cases this can lead to vaginal adhesions. Once a diagnosis has been made which may require a referral to another health professional, you will be provided with information and advice and a pathway of care appropriate to your symptoms will be made. This may include treatments such as topical steroids.

In conclusion

If you develop any pain or soreness, abnormal discharge, bleeding or blisters, please inform your doctor or nurse as soon as possible for advice and if required, treatment.

Contacts

John Murray	0161 446 8036 or ring 0161 446 3000 and ask for bleep: 12730
Angela Leather	0161 918 7219 or ring 0161 446 3000 and ask for bleep: 12723
Jacqui Stringer	0161 446 3524 or mobile: 07913 292070

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

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