

WAGO 2025 ANNUAL MEETING

ORAL ABSTRACT



Survivorship sexual health after pelvic radiation for cervical cancer

Megan Ryu, UC Irvine School of Medicine

Objectives

Sexual dysfunction after pelvic radiation for cervical cancer is an under recognized yet key aspect in the quality of life of patients after treatment. The goal of this cross-sectional study was to capture patients' experiences and establish the importance of addressing this dimension of survivorship.

Methods

Cervical cancer patients who received pelvic radiation treatment were identified by Honest Broker. Patients were interviewed by phone using a clinical needs assessment survey for sexual health. The interview tool included questions on sexual health concerns and counseling, scored either with a Likert scale or an open-ended response. Descriptive analyses and summative statistics were performed.

Results

Sixty-six out of 500 patients contacted completed the phone interview. Most patients were Hispanic (56%) and attracted to men (94%). Most patients (77%) responded that cancer and/or cancer treatment changed their sexual health, and 66% reported distress about their sex lives. When asked about their most upsetting sexual health concerns, the most common responses were lack of sexual libido (33%), vaginal dryness (27%), and pain (24%). Seventy-three percent felt comfortable discussing their sexual health with their oncologist, and 80% felt that their oncologist was comfortable discussing sexual health with them. Similarly, 68% of participants felt that their nurse or nurse practitioner was comfortable discussing sexual health, and 75% of participants felt comfortable discussing sexual health with them. However, at each stage of cancer treatment, most respondents did not receive information from their oncology team on sexual health: initial diagnosis 67%, before treatment 70%, after starting treatment 62%, after treatment completion 59%, and follow-up visit 61% (Figure 3). 68% of participants agreed that sexual health resources are important to them, and 62% of participants would be interested in having a multidisciplinary sexual health clinic in the oncology center.

Conclusions

Sexual dysfunction in cervical cancer patients treated with pelvic radiation is a common source of distress. Although patients and providers are comfortable discussing sexual health, lack of counseling and information shared by providers was identified as a key barrier to addressing these concerns.

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