

Sexual Health Following Prostate Cancer Surgery

While prostate cancer survival rates have never been higher, effective treatments can cause side effects. Even with today's minimally invasive, nerve-sparing surgery, most men will experience changes in sexual function following prostate removal, with erectile dysfunction being a common problem. Radiation also causes erectile dysfunction for many men. While these changes in sexual health can be troubling, it's important to know the following:

Every Recovery is Different

For most men, surgery or radiation will have an impact on sexual function, but how quickly it improves varies widely from person to person. Age, general health and sexual function prior to treatment all play a role in how quickly function is regained. As the impacted nerves recover, men may notice subtle improvements, but for the majority, regaining sexual function is a gradual process that may take up to two years. "Every patient is unique, and so is every recovery," said Christy Krieg, MSN, CUNP, family nurse practitioner, IU Health Urology. "Patients sometimes compare their recovery path to others', which can be disheartening. We encourage patients to focus on their personal progress, however gradual, to lessen worry."

Nerve Pathways related to Sexual Activity are Distinct

Two different sets of nerves control erection and sensation. While surgery and radiation can affect the nerves involved in erection, men are still able to experience sensation and climax. The nerves from erection simply deliver the signal from the brain to the penis to get an erection. Prostate cancer treatment does not injure the penis. The signal to get an erection can be delivered by putting a few drops of medicine into the side of the penis with a tiny needle. There is actually a third set of nerves involved in orgasm and climax, which are not injured during prostate cancer treatment. The function of the prostate is to produce the fluid that supports sperm (semen). With removal of the prostate or scarring caused by radiation, ejaculate will decrease in volume or be eliminated altogether.



Communicating with Your Partner is Key

Sex is likely to be different after prostate cancer treatment, so it can be helpful for men and their partners to discuss the changes and their feelings. For some couples, this may be the first time they've talked about sex, which may be challenging or awkward in the beginning. While there are no restrictions on resuming sexual relations after surgery, some men may not want to have sex right away. Communicating honestly and openly will help couples determine how and when to resume their sexual relationship and enable them to confide in one another if adjustments need to be made.

Additionally, it may be helpful for couples to focus on other forms of intimacy during recovery. Affection and physical touching can be reassuring and mutually satisfying, while offering a way for couples to stay connected.

"Intimacy takes many forms," said Krieg. "Highly satisfying sexual intimacy is still possible after treatment for prostate cancer, though it may take more effort and communication."

There are Treatments Available to help Most Men

During follow-up visits, your urologist will likely discuss sexual health and function. Use this time to ask questions and seek advice. There are a wide variety of treatments for erectile dysfunction, and your doctor can help determine which options are right for you.

Try and stay positive

While regaining sexual function following prostate cancer treatment can be challenging, it's important for men and their partners to know that satisfying sexual relationships are still possible. Resist the urge to continuously worry about sexual function and try to focus more fully on enjoying the experience and time with your partner. If frustrations linger and staying positive becomes more difficult, talk to your urologist or primary care doctor who will be able to suggest other resources, refer you to a therapist or provide information about local prostate cancer support groups.

