

Sexual Side-Effects



Changes in a man's sex life are common and can be managed.

Even without prostate cancer, getting older can cause changes in a man's sex life.

Prostate cancer and its treatment may bring more changes. The good news is that you and your partner, can still enjoy sex.

What changes are most likely to happen and why do they happen?

Changes in your sex drive:

There are many reasons why you may feel that your interest in sex is changing:



Your feelings about having cancer and concerns about the treatment side effects can lower your interest in sex. It's common for men and their partners to feel worried, sad, or tired even before cancer treatment starts. Things other than sex and pleasure may take more of a priority. In time, your interest in sex may return, especially as your feelings about cancer ease.



Cancer treatments such as chemotherapy and radiation can cause fatigue and result in less interest in sex. Hormone treatment reduces your testosterone levels directly and with it comes a decrease in libido (sex drive). If your hormone treatment is temporary, your sex drive is likely to return. If it becomes the way you and your doctor decide to control your prostate cancer on an ongoing basis, your libido will likely remain very low. Medications (such as those for pain or depression) can also lower sex drive.

Changes in erections:

The natural aging process includes a decrease in a man's ability to get and maintain an erection. Prostate cancer treatments may reduce a man's ability to have or keep an erection. Treatment may cause damage to nerves or blood vessels, preventing blood from going into the penis to make it hard.



After prostate surgery, erections are usually weak for the first few months. They may improve over the next year or two if the nerves near the prostate were not removed. The younger a man is, and if he had erections firm enough for penetration before surgery, the more easily erections return after surgery. In general, men in their 40s do better than men in their 50s, who do better than men in their 60s, and so on. Men may also notice that their penis is a bit shorter when not erect. It is called 'penile shrinkage' and this process can be reversed when a man engages in what is called 'penile rehabilitation.' Some men experience a penile curvature, called *Peyronie's disease*. This can be mild and not interfere with intercourse. If it is more severe and interferes with intercourse, it can be treated medically or surgically. Talk to your doctor if you notice curvature in your penis.



After radiation treatments, erections gradually decrease in firmness. This may develop even years after treatment.



After hormone treatments, the loss of testosterone causes erection problems. Erections become shorter and genitals may shrink a bit. Like after surgery, men can work on maintaining the length of the penis if they engage in penile rehabilitation. The changes caused by the treatments may reverse a few months after the treatment ends, but some men continue to receive hormone treatments for several years.





Changes in orgasms are not uncommon and may vary for every individual.



After surgery for prostate cancer, men experience “dry orgasms.” They do not ejaculate fluid. They still feel the pleasure of orgasm, but little or no fluid (semen) is released. This is because the prostate gland is no longer making the fluid that mixes with sperm. Some men miss having an ejaculation because it was part of their experience of pleasure. Feelings of loss or sadness are normal.



During/after radiation, men ejaculate increasingly smaller amounts of semen. This is because radiation breaks down the ability of the prostate to make semen.



After hormonal treatment, it may be difficult for a man to have an orgasm. This is because of the loss of testosterone, which is the energy behind sexual excitement. However, some men are still able to experience orgasm. When there is an orgasm, smaller amounts of semen come out.



After surgery for prostate cancer, men may experience urine leakage during orgasm for several months, even if they are otherwise dry. This generally improves with time. Urine squirted into the partner’s body is almost sterile and does not put the partner at risk for infection. There are surgical options to correct this if improvement does not occur.



How do men and their partners deal with sexual change and concerns?

Here are tips to deal with sexual changes:

Even if you are single, you may eventually have a relationship and find these tips useful. Keep in mind that prostate cancer cannot be spread to your partner. Your partner cannot “catch it” from having intercourse, kissing, or other intimate contact with you.



Talk openly and honestly with your partner. It may not be easy for you to talk about sexual concerns, but sharing your feelings and needs will make it easier for both of you. Encourage your partner to read this information and to talk with you about it.



Plan sexual activities for times when you're well rested. Empty your bladder before sex. If you're worried about leaking urine, wear a condom. Take your time.



Be willing to try new ways to stay close and share intimacy. Many couples share sexual intimacy and pleasure without intercourse. Hugging, kissing, cuddling, and holding hands can help you stay close. Lying next to each other, making skin-to-skin contact, can be intimate and loving.



Be creative in ways that suit you and your partner.

- Caresses with your hands, lips, or tongue can be very pleasurable.
- Orgasms can occur from hand caressing or oral sex for both partners.
- Vibrators can increase pleasure for both partners. They increase blood flow which is healthy for the parts of your body involved in sex. You can buy them online at web sites with good reputations that will not sell your name to mailing lists.



Masturbation is a good source of pleasure. Regular sexual stimulation brings blood flow into the penis which is healthy for the recovery of sexual function. Sexual stimulation supports the maintenance of sexuality as a normal body function.



Discuss all of your medicines with your healthcare team. Certain medicines, even those you buy over the counter, can cause or contribute to problems with erections.



Treatments for erection problems.

Talk with your doctor.

If you had prostate surgery, ask your doctor about penile rehabilitation. This treatment helps give a man the best chance of restoring firmer erections after surgery. Rehabilitation may include using pills, urethral pellets, injections, and/or a mechanical device to stimulate blood flow. Penile rehabilitation also helps stretch your penis so that you can regain your penile length.

Any man having problems with erections can ask his doctor whether the treatments listed below might work for him. They all have some side effects.

Most require a prescription, and some cannot be used if you are taking certain heart medicines.

Most treatments for erection problems involve some hassles. Having support from your partner and keeping your expectations reasonable will help. A realistic goal is to have erections firm enough for intercourse.

Penile Rehabilitation Treatment Options



Treatment—Medications taken by mouth:

There are four common pills for erection problems:

- Viagra (generic name: Sildenafil Citrate and Revito)
- Cialis (Tadalafil)
- Levitra (Vardenafil)
- Stendra (Avanafil)



These will help you get an erection with sexual stimulation. They work by increasing the blood flow through the penis and by preventing the blood from leaving as easily once it arrives. They do not cause an erection all by themselves. They work best for men who have partial erections and would like more firmness and/or a longer duration of erection.



Treatment—Medications used in the penis:

- MUSE (generic name: Alprostadil) is a small pellet which is inserted into the opening of the penis. The pellet melts and the medicine is absorbed. If it works, an erection will begin within 8 – 10 minutes and last from 30 – 60 minutes.
- Bimix (Papaverine + Phentolamine), Trimix (generic name: Papaverine + Phentolamine + Alprostadil), and other injectable medicines, are combinations of medicines, usually made in compounding pharmacies, that help to cause an erection.



Following injections, erections last between 40 – 60 minutes. Both treatments must be tried in the clinic with a doctor or nurse so the correct dose can be found for you. Receiving too much of any of these medicines can result in priapism: a condition in which the erection lasts several hours and is painful. This is very rare for men with erectile dysfunction (ED) after prostate cancer treatment, but is commonly mentioned in the advertisements for any of these products, because it is very uncomfortable when it does occur.



Treatment—A vacuum erection device (VED):

This is a device that is used to bring blood into the penis to create an erection. Here's how it works:

1. The soft penis is placed inside a plastic tube attached to a pump.
2. The pump creates a vacuum that draws blood into the penis.
3. A ring is placed at the base of the penis to keep blood from leaving.
4. The ring is removed within 30 – 40 minutes to allow the blood to flow out.



Some men feel the VED interferes with foreplay. But on the positive side, this is an erection aid that produces a firm erection in almost all men with the fewest side effects. Some, but not all men will be able to have an orgasm using this device.

You may notice unusual qualities associated with a VED erection. You may see that the erection has a 'hinging' effect, it does not stand up. This is because natural erections are rooted in the pelvic floor and VED erections are not. In addition, you may notice that the penis is cold after you use the constriction ring. It will warm up once it is inserted.



Treatment—Penile implant:

A penile implant requires surgery in which a pair of cylinders are placed inside the penis. These are inflated with water to create an artificial erection. This is a permanent solution to ED that has been associated with the highest satisfaction rates for both the man and his partner. Penile implants also help partners to have more spontaneous sex. Men with implants can have orgasms. However, surgery for an implant permanently removes tissue inside the penis and damages a man's natural ability to have erections. No natural erections will be possible after this surgery, only erections from use of the device. Most men prefer to try other treatments before considering this option. Recovery from the surgery takes from one to three weeks, with at least a six-week waiting period for sex. In addition, this treatment should not be pursued too early after surgery, as many men will continue to experience recovery of erectile function up to two years.

If you wish to consider this treatment, ask your doctor about different models of implants.



Health professionals help men and their partners with sexual concerns every day. Once you've identified your healthcare team, contact your providers when:



You have questions or concerns about your sexual functioning. A referral to a certified sex therapist may help you and your partner.



You want to try a different treatment for erection problems.



Your treatment does not satisfy you or your partner.

Additional resources can be found at the [Sexual Medicine Society of North America](https://bit.ly/3oEaZRf) (URL: <https://bit.ly/3oEaZRf>), the [Society for Sex Therapy and Research](https://bit.ly/3h9XOnu) (URL: <https://bit.ly/3h9XOnu>), and [American Association of Certified Sexuality Educators, Counselors and Therapists](https://bit.ly/30xxej2) (URL: <https://bit.ly/30xxej2>).

This guide contains general information and is not meant to replace consultation with your doctor or nurse.

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